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Access DB# 56347

## SEARCH REQUEST FORM

Scientific and Technical Information Center

Requester's Full Name: Durham C Jones Examiner #: 71299 Date: 07DEC01  
Art Unit: 1614 Phone Number 308-4634 Serial Number: 09/28290  
Mail Box and Bldg/Room Location: 2007 CM1 Results Format Preferred (circle) PAPER DISK E-MAIL  
(2001/CM1)

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Please provide a detailed statement of the search topic, and describe as specifically as possible the subject matter to be searched. Include the elected species or structures, keywords, synonyms, acronyms, and registry numbers, and combine with the concept or utility of the invention. Define any terms that may have a special meaning. Give examples or relevant citations, authors, etc, if known. Please attach a copy of the cover sheet, pertinent claims, and abstract.

Title of Invention: see attached sheet

Inventors (please provide full names): \_\_\_\_\_

Earliest Priority Filing Date: \_\_\_\_\_

\*For Sequence Searches Only\* Please include all pertinent information (parent, child, divisional, or issued patent numbers) along with the appropriate serial number.

Please search claims 1, 4, and 7 and 29

POINT OF CONTACT:  
BARB O'BRYEN  
TECH. INFORMATION SPECIALIST  
STIC CM1 ~~12014~~ 308-4291  
12E18

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	Type of Search	Vendors and cost where applicable
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Clerical Prep Time: _____	Patent Family _____	WWW/Internet _____
Online Time: <u>91</u>	Other _____	Other (specify) <u>Pharm Trans</u>

## CLAIMS

I claim:

1. A product comprising a first pharmaceutically acceptable composition comprising an alpha-adrenoceptor antagonist and a second pharmaceutically acceptable composition comprising a muscarinic antagonist, wherein said product is a combined preparation for simultaneous, separate or sequential use of said first composition and said second composition.

2. The product of Claim 1 wherein said alpha-adrenoceptor antagonist in said first composition is non-selective.

3. The product of Claim 1 wherein said alpha-adrenoceptor antagonist in said first composition is selective for  $\alpha_1$  receptors.

4. The product of Claim 3 wherein said alpha-adrenoceptor antagonist in said first composition is selected from the group consisting of 4-amino-6,7-dimethoxy-2-(5-methanesulfonamido-1,2,3,4-tetrahydroisoquinol-2-yl)-5-(2-pyridyl)quinazoline, doxazosin, tetrazosin, abanoquil, prazosin, and indoramin or pharmaceutically acceptable salts thereof.

5. The product of Claim 1 wherein said muscarinic antagonist in said second composition is non-selective.

6. The product of Claim 1 wherein said muscarinic antagonist in said second composition is selective for  $M_3$  receptors.

7. The product of Claim 1 wherein said muscarinic antagonist in said second composition is selected from the group consisting of darifenacin, tolterodine and oxybutynin or pharmaceutically acceptable salts thereof.

8. The product of Claim 1 wherein said muscarinic antagonist is darifenacin or a pharmaceutically acceptable salt thereof.

9. The product of Claim 1 wherein said first composition comprises doxazosin and said second composition comprises darifenacin or a pharmaceutically acceptable salt of either thereof.

5           10. The product of Claim 1 wherein said first composition comprises 4-amino-6,7-dimethoxy-2-(5-methanesulfonamido-1,2,3,4-tetrahydroisoquinol-2-yl)-5-(2-pyridyl)quinazoline and said second composition comprises darifenacin or a pharmaceutically acceptable salt of either thereof.

10           11. A medicament comprising an alpha-adrenoceptor antagonist in combination with a muscarinic antagonist.

15           12. The medicament of Claim 11 wherein said alpha-adrenoceptor antagonist is non-selective.

            13. The medicament of Claim 11 wherein said alpha-adrenoceptor antagonist is selective for  $\alpha_1$  receptors.

20           14. The medicament of Claim 11 wherein said alpha-adrenoceptor antagonist is selected from the group consisting of 4-amino-6,7-dimethoxy-2-(5-methanesulfonamido-1,2,3,4-tetrahydroisoquinol-2-yl)-5-(2-pyridyl)quinazoline, doxazosin, tetrazosin, abanoquil, prazosin, and indoramin or pharmaceutically acceptable salts thereof.

25           15. The medicament of Claim 11 wherein said muscarinic antagonist is non-selective.

            16. The medicament of Claim 11 wherein said muscarinic antagonist is selective for  $M_3$  receptors.

30           17. The medicament of Claim 11 wherein said muscarinic antagonist is selected from the group consisting of darifenacin, tolterodine and oxybutynin or pharmaceutically acceptable salts thereof.

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18. The medicament of Claim 11 wherein said muscarinic antagonist is darifenacin, or a pharmaceutically acceptable salt thereof.

5 19. The medicament of Claim 11 wherein said alpha-adrenoceptor antagonist is doxazosin and said muscarinic antagonist is darifenacin, or pharmaceutically acceptable salts of either thereof.

10 20. The medicament of Claim 11 wherein said alpha-adrenoceptor antagonist is 4-amino-6,7-dimethoxy-2-(5-methanesulfonamido-1,2,3,4-tetrahydroisoquinol-2-yl)-5-(2-pyridyl)quinazoline and said muscarinic antagonist is darifenacin, or pharmaceutically acceptable salts of either thereof.

15 21. A pharmaceutical composition comprising an alpha-adrenoceptor antagonist, a muscarinic antagonist and a pharmaceutically acceptable carrier.

22. The composition of Claim 21 wherein said alpha-adrenoceptor antagonist is non-selective or selective for  $\alpha_1$  receptors.

20 23. The composition of Claim 21 wherein said alpha-adrenoceptor antagonist is selected from the group consisting of 4-amino-6,7-dimethoxy-2-(5-methanesulfonamido-1,2,3,4-tetrahydroisoquinol-2-yl)-5-(2-pyridyl)quinazoline, doxazosin, tetrazosin, abanoquil, prazosin, and indoramin or pharmaceutically acceptable salts thereof.

25 24. The composition of Claim 21 wherein said muscarinic antagonist is non-selective or selective for  $M_3$  receptors.

30 25. The composition of Claim 21 wherein said muscarinic antagonist is selected from the group consisting of darifenacin, tolterodine and oxybutynin or pharmaceutically acceptable salts thereof.

26. The composition of Claim 21 wherein said muscarinic antagonist is darifenacin, or a pharmaceutically acceptable salt thereof.

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27. The composition of Claim 21 wherein said alpha-adrenoceptor antagonist is doxazosin and said muscarinic antagonist is darifenacin, or pharmaceutically acceptable salts of either thereof.

5           28. The composition of Claim 21 wherein said alpha-adrenoceptor antagonist is 4-amino-6,7-dimethoxy-2-(5-methanesulfonamido-1,2,3,4-tetrahydroisoquinol-2-yl)-5-(2-pyridyl)quinazoline and said muscarinic antagonist is darifenacin, or pharmaceutically acceptable salts of either thereof.

10           29. A method for treating the lower urinary tract symptoms associated with benign hyperplasia in mammals comprising administering to a mammal in need thereof an effective amount of an alpha-adrenoceptor antagonist in combination with a muscarinic antagonist.

15           30. The method of Claim 29 wherein said alpha-adrenoceptor antagonist and said muscarinic antagonist is administered simultaneously.

20           31. The method of Claim 29 wherein said alpha-adrenoceptor antagonist and said muscarinic antagonist is administered separately.

            32. The method of Claim 29 wherein said alpha-adrenoceptor antagonist and said muscarinic antagonist is administered sequentially.

25           33. The method of claim 29 wherein the alpha-adrenoceptor antagonist is non-selective or selective for  $\alpha_1$  receptors.

            34. The method of Claim 29 wherein said alpha-adrenoceptor antagonist is selected from the group consisting of 4-amino-6,7-dimethoxy-2-(5-methanesulfonamido-1,2,3,4-tetrahydroisoquinol-2-yl)-5-(2-pyridyl)quinazoline, doxazosin, tetrazosin, abanoquil, prazosin, and indoramin or pharmaceutically acceptable salts thereof.

30

            35. The method of Claim 29 wherein said muscarinic antagonist is non-selective or selective for  $M_3$  receptors.



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Bib Data Sheet

CONFIRMATION NO. 8690

<b>SERIAL NUMBER</b> 09/778,290	<b>FILING DATE</b> 02/07/2001 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> PC10325AAKM
<b>APPLICANTS</b> Michael G. Wyllie, Herne Kent, UNITED KINGDOM; <b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/181,310 02/09/2000 <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/13/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 39
				<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> Gregg C. Benson Pfizer Inc. Patent Department, MS 4159 Eastern Point Road Groton, CT 06340				
<b>TITLE</b> Pharmaceutical combinations				
<b>FILING FEE RECEIVED</b> 1132	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

L12 3 SEA FILE=REGISTRY ABB=ON OXYBUTYNIN?/CN  
 L16 8625 SEA FILE=HCAPLUS ABB=ON (L5 OR L6 OR L7 OR L8 OR L9) OR  
 DOXAZOSIN? OR TERAZOSIN? OR TETRAZOSIN? OR ABANOQUIL? OR  
 PRAZOSIN? OR INDORAMIN?  
 L17 441 SEA FILE=HCAPLUS ABB=ON (L10 OR L11 OR L12) OR DARIFENACIN?  
 OR TOLTERODIN? OR OXYBUTYNIN?  
 L18 25 SEA FILE=HCAPLUS ABB=ON L16 AND L17  
 L22 154949 SEA FILE=HCAPLUS ABB=ON URINARY TRACT+NT/CT  
 L23 773 SEA FILE=HCAPLUS ABB=ON MICTURIT?  
 L24 2484 SEA FILE=HCAPLUS ABB=ON PROSTAT?(L)HYPERPLAS?/OBI  
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 L21 1321 SEA FILE=HCAPLUS ABB=ON MUSCARINIC ANTAGONISTS+OLD/CT  
 L32 38 SEA FILE=HCAPLUS ABB=ON (L19 OR L20) (L) (THU OR BAC) /RL  
 L33 11 SEA FILE=HCAPLUS ABB=ON L21 (L) (THU OR BAC) /RL  
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*Roles - THU =  
 therapeutic use  
 BAC = biological  
 activity*

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 L28 18 SEA FILE=HCAPLUS ABB=ON L27 AND L21  
~~L30 13 SEA FILE=HCAPLUS ABB=ON L28 AND PHARMAC?/SC~~

=> s 115 or 131 or 134 or 130

~~L117 25 L15 OR L31 OR L34 OR L30~~

~~=> dup rem L114, L117, L115, L116~~

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PROCESSING COMPLETED FOR L115

PROCESSING COMPLETED FOR L116

~~L118 73 DUP REM L114, L117, L115, L116 (4 DUPLICATES REMOVED)~~

ANSWERS '1-28' FROM FILE MEDLINE

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ANSWERS '53-69' FROM FILE EMBASE

ANSWERS '70-73' FROM FILE WPIDS

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L118 ANSWER 1 OF 73

MEDLINE

DUPLICATE 3

ACCESSION NUMBER: 2000040728 MEDLINE

DOCUMENT NUMBER: 20040728 PubMed ID: 10571617

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 L102 188 SEA FILE=WPIDS ABB=ON PARASYMPATHOLYTIC? OR ANTIMUSCARIN?  
 L104 23 SEA FILE=WPIDS ABB=ON (L99 OR L100) AND (L101 OR L102)  
 L105 20261 SEA FILE=WPIDS ABB=ON URIN? OR MICTURIT? OR PROSTAT?(3A) (HYPER TROPH? OR HYPERPLAS? OR HYPER(W) (TROPH? OR PLAS?))  
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 L12 3 SEA FILE=REGISTRY ABB=ON OXYBUTYNIN?/CN  
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 PRAZOSIN? OR INDORAMIN?  
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 L74 1984 SEA FILE=EMBASE ABB=ON MUSCARINIC RECEPTOR BLOCKING AGENT/CT  
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=> s 177 or 187 or 188 or 190 or 192 or 196

~~L115 18 L77 OR L87 OR L88 OR L90 OR L92 OR L96..~~

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=> d que 1103; d que 1106; s 1103 or 1106

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 L98 87 SEA FILE=WPIDS ABB=ON DARIFENACIN? OR TOLTERODIN? OR OXYBUTYNI  
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L56 3209 SEA FILE=MEDLINE ABB=ON (L35 OR L36) (L) TU/CT  
 L57 3145 SEA FILE=MEDLINE ABB=ON (L37 OR L38) (L) TU/CT  
~~L59 13 SEA FILE=MEDLINE ABB=ON (L52 OR L53 OR L54 OR L55) AND L56  
 AND L57~~

=> s 165 or 150 or 159

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 substance identification.

=> d que 177; d que 187; d que 188; d que 190; d que 192; d que 196

L5 3 SEA FILE=REGISTRY ABB=ON DOXAZOSIN?/CN  
 L6 3 SEA FILE=REGISTRY ABB=ON TERAZOSIN?/CN  
 L7 1 SEA FILE=REGISTRY ABB=ON ABANOQUIL/CN  
 L8 4 SEA FILE=REGISTRY ABB=ON PRAZOSIN?/CN  
 L9 5 SEA FILE=REGISTRY ABB=ON INDORAMIN?/CN  
 L10 2 SEA FILE=REGISTRY ABB=ON DARIFENACIN?/CN  
 L11 2 SEA FILE=REGISTRY ABB=ON TOLTERODINE?/CN  
 L12 3 SEA FILE=REGISTRY ABB=ON OXYBUTYNIN?/CN  
 L71 19526 SEA FILE=EMBASE ABB=ON (L5 OR L6 OR L7 OR L8 OR L9) OR  
 DOXAZOSIN? OR TERAZOSIN? OR TETRAZOSIN? OR ABANOQUIL? OR  
 PRAZOSIN? OR INDORAMIN?  
 L72 1560 SEA FILE=EMBASE ABB=ON (L10 OR L11 OR L12) OR DARIFENACIN? OR  
 TOLTERODIN? OR OXYBUTYNIN?  
~~L77 3 SEA FILE=EMBASE ABB=ON L71 (L) CB/CT AND L72 (L) CB/CT~~

*Subheading  
 CB = drug combination*

L73 5203 SEA FILE=EMBASE ABB=ON ALPHA ADRENERGIC RECEPTOR BLOCKING  
 AGENT/CT  
 L74 1984 SEA FILE=EMBASE ABB=ON MUSCARINIC RECEPTOR BLOCKING AGENT/CT  
~~L87 1 SEA FILE=EMBASE ABB=ON L73 (L) CB/CT AND L74 (L) CB/CT~~

L73 5203 SEA FILE=EMBASE ABB=ON ALPHA ADRENERGIC RECEPTOR BLOCKING  
 AGENT/CT  
 L74 1984 SEA FILE=EMBASE ABB=ON MUSCARINIC RECEPTOR BLOCKING AGENT/CT  
 L82 8725 SEA FILE=EMBASE ABB=ON PROSTATE HYPERTROPHY/CT  
~~L88 2 SEA FILE=EMBASE ABB=ON L82 AND L73 AND L74~~

L73 5203 SEA FILE=EMBASE ABB=ON ALPHA ADRENERGIC RECEPTOR BLOCKING  
 AGENT/CT  
 L74 1984 SEA FILE=EMBASE ABB=ON MUSCARINIC RECEPTOR BLOCKING AGENT/CT  
 L81 288441 SEA FILE=EMBASE ABB=ON URINARY TRACT DISEASE+NT/CT

*Subheading  
 DT = drug therapy*

~~L90 9 SEA FILE=EMBASE ABB=ON L73 (L) DT/CT AND L74 (L) DT/CT AND  
 L81 (L) DT/CT~~

=> fil medl; d que 165; d que 150; d que 159

~~FILE=~~ MEDLINE ENTERED AT 15:31:00 ON 18 DEC 2001

FILE LAST UPDATED: 17 DEC 2001 (20011217/UP). FILE COVERS 1958 TO DATE.

On April 22, 2001, MEDLINE was reloaded. See HELP RLOAD for details.

MEDLINE now contains IN-PROCESS records. See HELP CONTENT for details.

MEDLINE is now updated 4 times per week. A new current-awareness alert frequency (EVERYUPDATE) is available. See HELP UPDATE for more information.

MEDLINE thesauri in the /CN, /CT, and /MN fields incorporate the MeSH 2001 vocabulary. Enter HELP THESAURUS for details.

The OLDMEDLINE file segment now contains data from 1958 through 1965. Enter HELP CONTENT for details.

Left, right, and simultaneous left and right truncation are available in the Basic Index. See HELP SFIELDS for details.

THIS FILE CONTAINS CAS REGISTRY NUMBERS FOR EASY AND ACCURATE SUBSTANCE IDENTIFICATION.

L35 2138 SEA FILE=MEDLINE ABB=ON MUSCARINIC ANTAGONISTS/CT  
 L36 9415 SEA FILE=MEDLINE ABB=ON PARASYMPATHOLYTICS/CT  
 L37 9584 SEA FILE=MEDLINE ABB=ON ADRENERGIC ALPHA-ANTAGONISTS/CT  
 L38 5196 SEA FILE=MEDLINE ABB=ON SYMPATHOLYTICS/CT  
 L47 32991 SEA FILE=MEDLINE ABB=ON DRUG COMBINATIONS/CT  
 L48 65478 SEA FILE=MEDLINE ABB=ON DRUG THERAPY, COMBINATION+NT/CT  
 L63 9347 SEA FILE=MEDLINE ABB=ON (L35 OR L36) (L) (AD OR PK OR PD OR  
 TU) /CT  
 L64 12763 SEA FILE=MEDLINE ABB=ON (L37 OR L38) (L) (AD OR PK OR PD OR  
 TU) /CT  
~~L65 15 SEA FILE=MEDLINE ABB=ON L63 AND L64 AND (L47 OR L48)~~

*Subheadings*  
 AD- administration  
 & dosage  
 PK- pharmacokinetics  
 PD- pharmacology  
 & therapeutic use

L39 6542 SEA FILE=MEDLINE ABB=ON DOXAZOSIN/CT OR PRAZOSIN/CT OR  
 INDORAMIN/CT  
 L40 459 SEA FILE=MEDLINE ABB=ON TERAZOSIN? OR ABANOQUIL?  
 L41 517 SEA FILE=MEDLINE ABB=ON DARIFENACIN? OR TOLTERODIN? OR  
 OXYBUTYNIN?  
~~L50 3 SEA FILE=MEDLINE ABB=ON (L39 OR L40) AND L41~~

L35 2138 SEA FILE=MEDLINE ABB=ON MUSCARINIC ANTAGONISTS/CT  
 L36 9415 SEA FILE=MEDLINE ABB=ON PARASYMPATHOLYTICS/CT  
 L37 9584 SEA FILE=MEDLINE ABB=ON ADRENERGIC ALPHA-ANTAGONISTS/CT  
 L38 5196 SEA FILE=MEDLINE ABB=ON SYMPATHOLYTICS/CT  
 L42 346877 SEA FILE=MEDLINE ABB=ON UROLOGIC DISEASES+NT/CT  
 L43 259990 SEA FILE=MEDLINE ABB=ON URINARY TRACT+NT/CT  
 L44 26839 SEA FILE=MEDLINE ABB=ON UROGENITAL ABNORMALITIES+NT/CT  
 L45 10481 SEA FILE=MEDLINE ABB=ON PROSTATIC HYPERPLASIA/CT  
 L52 36456 SEA FILE=MEDLINE ABB=ON L42 (L) DT/CT  
 L53 1196 SEA FILE=MEDLINE ABB=ON L44 (L) DT/CT  
 L54 1464 SEA FILE=MEDLINE ABB=ON L45 (L) (DT OR DE) /CT  
 L55 37337 SEA FILE=MEDLINE ABB=ON L43 (L) DE/CT

*Subheadings*  
 DT- drug therapy  
 DE- drug effects

=> fil reg; d ide l4

FILE 'REGISTRY' ENTERED AT 14:15:30 ON 18 DEC 2001

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DICTIONARY FILE UPDATES: 16 DEC 2001 HIGHEST RN 375793-75-2

TSCA INFORMATION NOW CURRENT THROUGH July 7, 2001

Please note that search-term pricing does apply when  
conducting SmartSELECT searches.

Crossover limits have been increased. See HELP CROSSOVER for details.

Calculated physical property data is now available. See HELP PROPERTIES  
for more information. See STNote 27, Searching Properties in the CAS  
Registry File, for complete details:

<http://www.cas.org/ONLINE/STN/STNOTES/stnotes27.pdf>

L4 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2001 ACS

RN 210538-44-6 REGISTRY

CN Methanesulfonamide, N-[2-[4-amino-6,7-dimethoxy-5-(2-pyridinyl)-2-quinazolinyl]-1,2,3,4-tetrahydro-5-isoquinolinyl]- (9CI) (CA INDEX NAME)

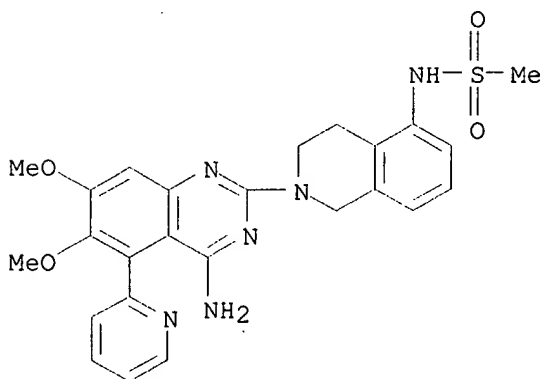
FS 3D CONCORD

MF C25 H26 N6 O4 S

CI COM

SR CA

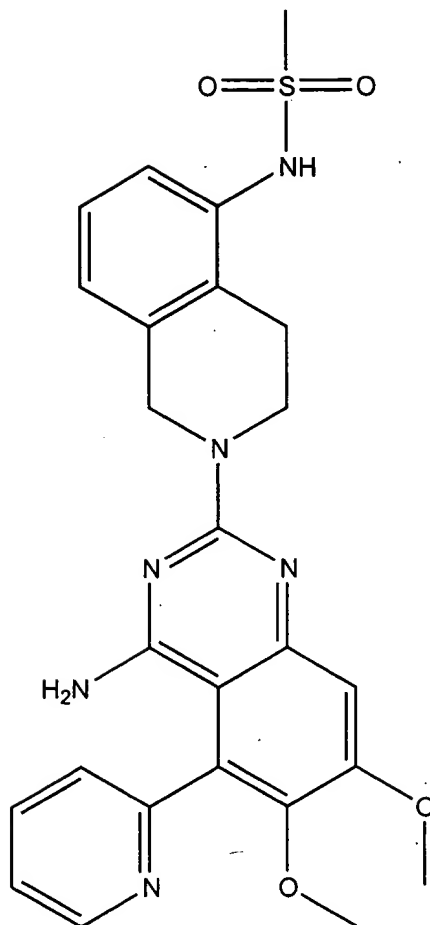
LC STN Files: CA, CAPLUS, TOXLIT, USPATFULL



\*\*PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT\*\*

3 REFERENCES IN FILE CA (1967 TO DATE)

3 REFERENCES IN FILE CAPLUS (1967 TO DATE)



4-amino-6,7-dimethoxy-2-(5-methanesulfonamido-1,2,3,4-tetrahydroisoquinol-2-yl)-5-(2-pyridyl)quinazoline

L118 ANSWER 6 OF 73 MEDLINE  
ACCESSION NUMBER: 1998236826 MEDLINE  
DOCUMENT NUMBER: 98236826 PubMed ID: 9575912  
TITLE: Entropy measures of heart rate variation in conscious dogs.  
AUTHOR: Palazzolo J A; Estafanous F G; Murray P A  
CORPORATE SOURCE: Department of Biomedical Engineering, Case Western Reserve University, Cleveland, Ohio 44106, USA.  
SOURCE: AMERICAN JOURNAL OF PHYSIOLOGY, (1998 Apr) 274 (4 Pt 2) H1099-105.  
Journal code: 3U8; 0370511. ISSN: 0002-9513.  
PUB. COUNTRY: United States  
Journal; Article;. (JOURNAL ARTICLE)  
LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 199806  
ENTRY DATE: Entered STN: 19980611  
Last Updated on STN: 19980611  
Entered Medline: 19980602

AB Our goal was to determine the contributions of sympathetic and parasympathetic activity to entropy measures of heart rate variability (HRV). We compared our results with two commonly used methods to analyze HRV: standard deviation (SDNN) and power spectral analysis (HF norm). Beat-by-beat analysis of R-R intervals was performed in conscious dogs. The R-R intervals were analyzed with approximate entropy (ApEn) and entropy of symbolic dynamics (SymDyn) to assess the effects of reducing system complexity. This was achieved by pharmacologically inhibiting sympathetic, parasympathetic, and total autonomic nervous system regulation of heart rate. Three conditions were examined: rest, standing, and systemic hypotension. At rest or standing, sympathetic inhibition (propranolol) had no effect on ApEn or SymDyn, whereas parasympathetic (atropine) and combined (propranolol + atropine) inhibition reduced both entropy measures to near zero. Systemic hypotension reduced both entropy measures in intact dogs. When hypotension was induced after sympathetic inhibition, ApEn was increased compared with hypotension alone, whereas parasympathetic inhibition with hypotension resulted in near-zero ApEn. Changes in the entropy measures of HRV were directionally similar to changes in SDNN and HF norm. These results indicate that the entropy of R-R intervals reflects parasympathetic modulation of heart rate.

L118 ANSWER 7 OF 73 MEDLINE  
ACCESSION NUMBER: 1998114435 MEDLINE  
DOCUMENT NUMBER: 98114435 PubMed ID: 9453690  
TITLE: Prospective study comparing hyoscyamine, doxazosin, and combination therapy for the treatment of urgency and frequency in women.  
AUTHOR: Serels S; Stein M  
CORPORATE SOURCE: Department of Urology, Montefiore Medical Center and Albert Einstein College of Medicine, Bronx, New York, USA.  
SOURCE: NEUROUROLOGY AND URODYNAMICS, (1998) 17 (1) 31-6.  
Journal code: BRQ; 8303326. ISSN: 0733-2467.  
PUB. COUNTRY: United States  
(CLINICAL TRIAL)  
(CONTROLLED CLINICAL TRIAL)  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 199803  
ENTRY DATE: Entered STN: 19980326  
Last Updated on STN: 19980326  
Entered Medline: 19980318

AB Anticholinergics are commonly used for the treatment of frequency, urgency, and urge incontinence in women. Alpha-blockers have been shown to

controlled respiration (n=10; CR). Nonbaroreflex sequences were defined as  $\geq 3$  beats in which SAP and PI of the following beat changed in the opposite direction. CAB reduced the number of nonbaroreflex sequences (19.1 $\pm$ 12.3 versus 88.7 $\pm$ 36.6,  $P < 0.05$ ), as did SB (25.3 $\pm$ 11.7 versus 84.6 $\pm$ 23.9,  $P < 0.001$ ) and atropine (11.2 $\pm$ 6.8 versus 94.1 $\pm$ 32.4,  $P < 0.05$ ). SB concomitantly increased baroreflex sensitivity (1.18 $\pm$ 0.11 versus 0.47 $\pm$ 0.09 ms/mm Hg,  $P < 0.01$ ). SAD and CR did not significantly affect their occurrence. CONCLUSIONS: These results suggest that nonbaroreflex sequences represent the expression of an integrated, neurally mediated, feed-forward type of short-term cardiovascular regulation able to interact dynamically with the feedback mechanisms of baroreflex origin in the control of heart period.

L118 ANSWER 5 OF 73 MEDLINE  
 ACCESSION NUMBER: 1998321928 MEDLINE  
 DOCUMENT NUMBER: 98321928 PubMed ID: 9660491  
 TITLE: Synergistic receptor-activated calcium increases in single nonpigmented epithelial cells.  
 AUTHOR: Cilluffo M C; Xia S L; Farahbakhsh N A; Fain G L  
 CORPORATE SOURCE: Department of Physiological Science, University of California, Los Angeles 90095-1527, USA.  
 CONTRACT NUMBER: EY06969 (NEI)  
 SOURCE: EY07568 (NEI)  
 INVESTIGATIVE OPHTHALMOLOGY AND VISUAL SCIENCE, (1998 Jul) 39 (8) 1429-35.  
 Journal code: GWI; 7703701. ISSN: 0146-0404.  
 PUB. COUNTRY: United States  
 Journal; Article; (JOURNAL ARTICLE)  
 LANGUAGE: English  
 FILE SEGMENT: Priority Journals  
 ENTRY MONTH: 199807  
 ENTRY DATE: Entered STN: 19980723  
 Last Updated on STN: 19980723  
 Entered Medline: 19980714

AB PURPOSE: To determine whether single nonpigmented ciliary body cells contain the signaling mechanism to produce synergistic drug-activated increases in  $Ca^{2+}$ , or whether these responses are produced cooperatively by interaction among groups of cells. METHODS: Suspensions of single nonpigmented cells were plated onto soft collagen gels. Fura-2 fluorescence ratio imaging was used to examine receptor-evoked changes in intracellular  $Ca^{2+}$  concentration. RESULTS: Nonpigmented cells plated on soft collagen gels retained a rounded shape with membrane evaginations visible on their surface. Application of acetylcholine (10 microm) or epinephrine (1 microm) each produced small increases in intracellular  $Ca^{2+}$ , but in combination they produced a  $Ca^{2+}$  increase of more than 10-fold. This synergistic  $Ca^{2+}$  increase was a result of activation of muscarinic and  $\alpha_2$ -adrenergic receptors because a specific  $\alpha_2$ -adrenergic agonist could substitute for epinephrine in producing the response. The response could be blocked by a specific  $\alpha_2$ -antagonist and a muscarinic antagonist. An  $\alpha_1$ -agonist could not substitute for epinephrine in producing a synergistic increase nor could the synergism be blocked by  $\alpha_1$ - or  $\beta$ -antagonists. The  $Ca^{2+}$  increase was largely produced by release from internal stores, because the peak amplitude of the response was nearly the same in the external solution containing a low  $Ca^{2+}$  concentration; however, the influx of  $Ca^{2+}$  into the cell was responsible for maintenance of a steady component of the  $Ca^{2+}$  increase during maintained drug stimulation and for refilling the internal stores. CONCLUSIONS: Single nonpigmented cells can produce synergistic increases in  $Ca^{2+}$  on multiple receptor activation, indicating that the mechanism of synergism does not require the interaction of multiple cells. The  $Ca^{2+}$  increase is a result of release from internal stores and  $Ca^{2+}$  entry through an as yet undefined conductance or transport system in the plasma membrane.

✓  
 Composition  
 claim

CORPORATE SOURCE: North Texas Center for Urinary Control, (RRD), Fort Worth, Texas, USA.  
SOURCE: UROLOGY, (2000 Dec 4) 56 (6 Suppl 1) 41-9. Ref: 69  
Journal code: WSY; 0366151. ISSN: 1527-9995.  
PUB. COUNTRY: United States  
Journal; Article; (JOURNAL ARTICLE)  
General Review; (REVIEW)  
(REVIEW, TUTORIAL)  
LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 200103  
ENTRY DATE: Entered STN: 20010404  
Last Updated on STN: 20010521  
Entered Medline: 20010315

AB Continued developments in the understanding of lower urinary tract function have led to improvements in the pharmacologic manipulation of bladder dysfunction. Drug delivery changes have produced drugs that provide better efficacy and tolerability, thus improving patient compliance. Improvements in drug delivery systems have altered drug bioavailability and pharmacokinetics. Active current investigation in new agents and delivery systems for intravesical delivery has yielded intriguing early results that may substantially add to the armamentarium for the management of the overactive bladder (urgency, frequency, urge incontinence). New developments in the understanding of the neuropharmacology of the bladder, peripheral pelvic nerves, and sacral cord may provide agents with entirely new drug effects, either as primary agents or agents to be used in combination with currently available drugs. We herein review newer agents and drug delivery systems.

L118 ANSWER 4 OF 73 MEDLINE  
ACCESSION NUMBER: 1999206996 MEDLINE  
DOCUMENT NUMBER: 99206996 PubMed ID: 10190888  
TITLE: Investigating feed-forward neural regulation of circulation from analysis of spontaneous arterial pressure and heart rate fluctuations.  
AUTHOR: Legramante J M; Raimondi G; Massaro M; Cassarino S; Peruzzi G; Iellamo F  
CORPORATE SOURCE: Dipartimento di Medicina Interna, Cattedra di Fisiopatologia Medica, Universita di Roma "Tor Vergata," Roma, Italia.. legramante@med.uniroma2.it  
SOURCE: CIRCULATION, (1999 Apr 6) 99 (13) 1760-6.  
Journal code: DAW; 0147763. ISSN: 0009-7322.  
PUB. COUNTRY: United States  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: English  
FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals  
ENTRY MONTH: 199904  
ENTRY DATE: Entered STN: 19990511  
Last Updated on STN: 19990511  
Entered Medline: 19990429

AB BACKGROUND: Analysis of spontaneous fluctuations in systolic arterial pressure (SAP) and pulse interval (PI) reveals the occurrence of sequences of consecutive beats characterized by SAP and PI changing in the same (+PI/+SAP and -PI/-SAP) or opposite (-PI/+SAP and +PI/-SAP) direction. Although the former reflects baroreflex regulatory mechanisms, the physiological meaning of -PI/+SAP and +PI/-SAP is unclear. We tested the hypothesis that -PI/+SAP and +PI/-SAP "nonbaroreflex" sequences represent a phenomenon modulated by the autonomic nervous system reflecting a feed-forward mechanism of cardiovascular regulation. METHODS AND RESULTS: We studied anesthetized rabbits before and after (1) complete autonomic blockade (guanethidine+propranolol+atropine, n=13; CAB), (2) sympathetic blockade (guanethidine+propranolol, n=15; SB), (3) parasympathetic blockade (atropine, n=16), (4) sinoaortic denervation (n=10; SAD), and (5)



TITLE: The pharmacological treatment of urinary incontinence.  
AUTHOR: Andersson K E; Appell R; Cardozo L D; Chapple C; Drutz H P;  
Finkbeiner A E; Haab F; Vela Navarrete R  
CORPORATE SOURCE: The Department of Clinical Pharmacology, Lund University  
Hospital, Lund, Sweden.. Karl-Erik.Andersson@klinfarm.lu.se  
SOURCE: BJU INTERNATIONAL, (1999 Dec) 84 (9) 923-47. Ref: 280  
Journal code: DCU; 100886721. ISSN: 1464-4096.  
PUB. COUNTRY: ENGLAND: United Kingdom  
Journal; Article; (JOURNAL ARTICLE)  
General Review; (REVIEW)  
(REVIEW LITERATURE)  
LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 200001  
ENTRY DATE: Entered STN: 20000204  
Last Updated on STN: 20000204  
Entered Medline: 20000127

L118 ANSWER 2 OF 73 MEDLINE DUPLICATE 4  
ACCESSION NUMBER: 94167741 MEDLINE  
DOCUMENT NUMBER: 94167741 PubMed ID: 7907192  
TITLE: Effects of intravesically administered anticholinergics,  
beta-adrenergic stimulant and alpha-adrenergic blocker on  
bladder function in unanesthetized rats.  
AUTHOR: Kimura O  
CORPORATE SOURCE: Department of Urology, Kyoto Prefectural University of  
Medicine.  
SOURCE: TOHOKU JOURNAL OF EXPERIMENTAL MEDICINE, (1993 Aug) 170 (4)  
251-60.  
Journal code: VTF; 0417355. ISSN: 0040-8727.  
PUB. COUNTRY: Japan  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 199404  
ENTRY DATE: Entered STN: 19940412  
Last Updated on STN: 19950206  
Entered Medline: 19940405

AB Comparative analysis of the effects of intravesical instillation of drugs  
on urodynamic parameters (MVP, maximum intravesical pressure; RR, residual  
rate; BC, bladder capacity) was performed using an experimental model in  
unanesthetized rats. The drugs investigated in this study were atropine  
( $7.2 \times 10^{-4}$ - $7.2 \times 10^{-2}$  M), propantheline ( $7.2 \times 10^{-3}$ - $2.2 \times 10^{-2}$   
M), oxybutynin ( $2.5 \times 10^{-3}$ - $2.5 \times 10^{-2}$  M), isoproterenol ( $5 \times$   
 $10^{-2}$ - $10^{-1}$  M) and prazosin ( $5 \times 10^{-4}$  M). Of the anticholinergics,  
propantheline and oxybutynin showed a remarkable suppression of  
MVP accompanied with a consistent increase of RR and BC in a  
dose-dependent manner. Atropine showed, however, no suppression of MVP in  
spite of a significant change of RR and BC. Isoproterenol suppressed MVP  
with an increase of RR and BC in a dose-dependent manner at a relatively  
high concentration. Prazosin increased BC and RR at a relatively low  
concentration. This study revealed that these intravesical drugs have the  
ability to suppress spontaneous bladder contraction in unanesthetized rats  
and to change the micturition function in the urinary filling and storage  
phases. It is expected that intravesical instillation therapy for detrusor  
hyperreflexia will be improved in the future based upon the data obtained.

L118 ANSWER 3 OF 73 MEDLINE  
ACCESSION NUMBER: 2001145109 MEDLINE  
DOCUMENT NUMBER: 20567028 PubMed ID: 11114562  
TITLE: Advancements in pharmacologic management of the overactive  
bladder.  
AUTHOR: Dmochowski R R; Appell R A

have a modulating effect on bladder smooth muscle but are not commonly used clinically for this indication. To evaluate the clinical effectiveness of each treatment as well as the combination therapy, we performed an open prospective study comparing these agents. Between September 1994 and October 1995, 34 women aged 28-91 (mean age, 62) received either 0.375 mg of sustained-release hyoscyamine twice a day or 2 mg doxazosin QHS prior to being crossed over to the other drug and/or the combination. Symptoms were assessed using an expanded American Urological Association (AUA) symptoms score, which included questions regarding incontinence at completion of each therapeutic phase. Evaluation included 6-channel urodynamics. All three therapies were noted to be effective in reducing AUA symptom scores. By urodynamic evaluation, a greater percentage of patients with increased voiding pressures or decreased compliance responded to doxazosin than hyoscyamine. Side effects were noted to be less prevalent with doxazosin than with the other therapies. There appears to be a significant role for alpha-blockers in the treatment of voiding symptoms in women.

L118 ANSWER 8 OF 73 MEDLINE

ACCESSION NUMBER: 97340862 MEDLINE

DOCUMENT NUMBER: 97340862 PubMed ID: 9197336

TITLE: Current management of the neonatal abstinence syndrome: a critical analysis of the evidence.

AUTHOR: Theis J G; Selby P; Ikizler Y; Koren G

CORPORATE SOURCE: Department of Pediatrics, Hospital for Sick Children, University of Toronto, Ont., Canada.

SOURCE: BIOLOGY OF THE NEONATE, (1997) 71 (6) 345-56. Ref: 57  
Journal code: A3P; 0247551. ISSN: 0006-3126.

PUB. COUNTRY: Switzerland  
Journal; Article; (JOURNAL ARTICLE)  
General Review; (REVIEW)  
(REVIEW, TUTORIAL)

LANGUAGE: English

FILE SEGMENT: Priority Journals

ENTRY MONTH: 199709

ENTRY DATE: Entered STN: 19971008  
Last Updated on STN: 19971008  
Entered Medline: 19970925

AB OBJECTIVE: To systematically and critically analyse and summarise the published evidence for the rational choice of pharmacologic treatment of the neonatal abstinence syndrome (NAS), a frequently observed condition in neonates born to mothers who are dependent on physically addicting drugs. DESIGN: Studies comparing different pharmacological agents for the treatment of NAS were identified utilising MEDLINE and additionally the references cited in pertinent articles. The identified studies were critically analysed regarding their study designs and outcome measures. The reported data for the comparative efficacy of the drugs were summarised and evaluated. RESULTS: Fourteen studies were identified, most of them comparing treatment of NAS with phenobarbital, paregoric or diazepam. However, none of these studies was conducted in a double-blind fashion. Frequently, treatment allocations were not properly randomised. Prenatal drug exposure varied and was often not sufficiently verified. Outcome measures and their evaluations differed widely. Due to the different study objectives and flaws in study design, a combined analysis of the published data in the form of a meta-analysis was not deemed possible. When attempting to compare efficacy, diazepam appears to be less efficacious in treating NAS than phenobarbital or paregoric. The relative efficacy of paregoric and phenobarbital appears to depend upon the antenatal exposure of the neonate and on the outcome measure of the study. Only two studies evaluate the efficacy of pure opioids, none of them in direct comparison to paregoric. It remains questionable whether paregoric, which contains the central stimulant camphor and a large amount of alcohol, should be the opioid of choice for the treatment of NAS.

CONCLUSION: Most published studies were conducted prior to the development of clinical epidemiology and modern study design and thus yielded only very limited comparative data on the benefits of different treatment protocols. There is very little evidence regarding the efficacy of different pharmacological therapy regimens to treat NAS. More studies are required to produce the evidence needed to allow a rational choice between treatment modalities of NAS and thus to ensure optimal care of the neonates suffering from this condition.

L118 ANSWER 9 OF 73 MEDLINE  
ACCESSION NUMBER: 1998026455 MEDLINE  
DOCUMENT NUMBER: 98026455 PubMed ID: 9381477  
TITLE: Medetomidine protection against diazinon-induced toxicosis in mice.  
AUTHOR: Yakoub L K; Mohammad F K  
CORPORATE SOURCE: Department of Physiology, Biochemistry and Pharmacology, College of Veterinary Medicine, University of Mosul, Iraq.  
SOURCE: TOXICOLOGY LETTERS, (1997 Sep 19) 93 (1) 1-8.  
Journal code: VXN; 7709027. ISSN: 0378-4274.  
PUB. COUNTRY: Netherlands  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 199711  
ENTRY DATE: Entered STN: 19971224  
Last Updated on STN: 20000303  
Entered Medline: 19971112

AB The protective effect of the alpha2-agonist medetomidine against the organophosphorus insecticide diazinon-induced toxicosis was examined in male mice. Oral dosing of diazinon at 75 and 100 mg/kg produced signs of toxicosis in mice characteristic of cholinergic over-stimulation, and the percentages of deaths were 90 and 100%, respectively. Subcutaneous (s.c.) injection of medetomidine at 0.05, 0.1 and 0.3 mg/kg, 15 min before diazinon (75 mg/kg, orally) significantly and dose-dependently decreased the incidence of toxic manifestations, delayed the onset of tremors and death, and increased the 24 h survival rates to 70, 80 and 100%, respectively. Similarly medetomidine pretreatments (0.1 and 0.3 mg/kg, s.c) significantly protected the mice from the toxicity of a high dose (100 mg/kg, orally) of diazinon, and increased the 24 h survival rates to 38 and 50%, respectively. The alpha2-antagonist atipamezole significantly abolished the protective effect of medetomidine. When atropine sulfate (6 mg/kg, s.c.) was combined with medetomidine (0.3 mg/kg, s.c.) the degree of protection against diazinon toxicosis was more than that produced by either drug alone. The data suggest that medetomidine protected mice against diazinon-induced toxicosis, and a combination of medetomidine and atropine produced an even greater degree of protection.

L118 ANSWER 10 OF 73 MEDLINE  
ACCESSION NUMBER: 96117012 MEDLINE  
DOCUMENT NUMBER: 96117012 PubMed ID: 8531612  
TITLE: Autonomic nervous system control of the heart: endurance exercise training.  
AUTHOR: Shi X; Stevens G H; Foresman B H; Stern S A; Raven P B  
CORPORATE SOURCE: Department of Physiology, University of North Texas Health Science Center, Fort Worth 76107, USA.  
CONTRACT NUMBER: HL43202 (NHLBI)  
HL45547 (NHLBI)  
T32HL07652 (NHLBI)  
SOURCE: MEDICINE AND SCIENCE IN SPORTS AND EXERCISE, (1995 Oct) 27 (10) 1406-13.  
Journal code: MG8; 8005433. ISSN: 0195-9131.  
PUB. COUNTRY: United States  
Journal; Article; (JOURNAL ARTICLE)

LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 199601  
ENTRY DATE: Entered STN: 19960220  
Last Updated on STN: 19960220  
Entered Medline: 19960130

AB The purpose of this study was to assess hemodynamic responses to lower body negative pressure (LBNP) to -45 torr with selective cardiac parasympathetic (using atropine sulphate), sympathetic efferent (using metoprolol tartrate), and combined (atropine+metoprolol) blockade prior to and following 8 months of endurance exercise training in eight young men. Training resulted in significant increases of maximal oxygen uptake (27%) and blood volume (16%) and a decrease of baseline heart rate (HR, from 66 +/- 4 to 57 +/- 4 bpm). This training related bradycardia was exclusively determined by an enhanced vagal tone as there was no significant difference in intrinsic HR pre- to post-training and only atropine (pre: 100 +/- 3 vs post: 101 +/- 3 bpm), not metoprolol (pre: 56 +/- 3 vs post: 49 +/- 4 bpm), abolished the HR difference. The reflex tachycardia in the control experiment was significantly diminished following training. However, the increase in HR at LBNP -45 torr between pre- and post-training was similar after either atropine (+13 +/- 2 vs +14 +/- 1 bpm) or metoprolol (+8 +/- 1 vs +8 +/- 1 bpm). Reflex tachycardia was greater during atropine than metoprolol blockade and the sum of the HR increase during selective blockade (21 and 22 bpm) was greater when compared with the control (no blockade, 16 +/- 2 vs 11 +/- 2 bpm). There was no difference pre- to post-training in SV or Qc response to -45 torr LBNP during the control condition. However, selective beta 1-receptor blockade resulted in a greater decrease in SV to -45 torr LBNP post-training compared to pre-training (P < 0.05). (ABSTRACT TRUNCATED AT 250 WORDS)

L118 ANSWER 11 OF 73 MEDLINE

ACCESSION NUMBER: 95299493 MEDLINE  
DOCUMENT NUMBER: 95299493 PubMed ID: 7780441  
TITLE: Autonomic dysreflexia in a rat model ~~spinal cord injury~~ and the effect of pharmacologic agents.  
AUTHOR: Rivas D A; Chancellor M B; Huang B; Salzman S K  
CORPORATE SOURCE: Department of Urology, Jefferson Medical College, Thomas Jefferson University, Philadelphia, PA 19107, USA.  
SOURCE: NEUROUROLOGY AND URODYNAMICS, (1995) 14 (2) 141-52.  
Journal code: BRQ; 8303326. ISSN: 0733-2467.  
PUB. COUNTRY: United States  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 199507  
ENTRY DATE: Entered STN: 19950726  
Last Updated on STN: 19950726  
Entered Medline: 19950720

AB The object of this study was to develop a spinal cord injury (SCI) rat model for autonomic dysreflexia (AD), assessing the effect of alpha-adrenergic and calcium channel blockade and to determine the relationship of detrusor-external sphincter dyssynergia (DESD) to the development of AD. A laminectomy was performed in male rats at the T4 or T10 level and a controlled 50 g cm blunt SCI was induced using an impounder. Four weeks after injury, changes in arterial blood pressure and heart rate were monitored while simultaneous cystometry (CMG) and pelvic floor electromyography (EMG) were performed in vivo in sham (control) and spinal cord injured rats. The effects of terazosin (0.1 mg/kg), diltiazem (0.5 mg/kg), and oxybutynin chloride (0.1 mg/kg) on hemodynamic changes were assessed independently. Both T4 and T10 SCI rat displayed evidence of DESD (enhanced pelvic floor EMG activity at cystometric capacity) while control rats did not. Only T4 injured rats

exhibited evidence of AD, with mean blood pressure elevations from 82.9 +/- 13.6 to 93.9 +/- 11.3 mm Hg ( $P < 0.01$ ) and a mean heart rate decrease from 332.2 +/- 56.5 to 311.1 +/- 54.5 beats/min ( $P = 0.02$ ) at cystometric capacity. The intravenous administration of **terazosin** or diltiazem abolished the AD response during CMG. The administration of **oxybutynin** exhibited the ability to increase bladder capacity and improve compliance in all 3 groups but did not blunt AD. The rat model of SCI effectively reproduced hemodynamic changes consistent with the AD complex in T4 level SCI but not T10 level SCI animals, despite incomplete lesions. Blockade with either an alpha-1 or a calcium channel antagonist effectively ablated the AD response to bladder distention. Anticholinergic agents had no effect on AD. DESD frequently accompanies autonomic dysreflexia, although the development of AD is not a prerequisite for DESD.

L118 ANSWER 12 OF 73 MEDLINE  
 ACCESSION NUMBER: 94127871 MEDLINE  
 DOCUMENT NUMBER: 94127871 PubMed ID: 8297160  
 TITLE: [Evaluation and treatment of neurogenic vesico-sphincter dysfunction].  
 Evaluation et traitement des dysfonctionnements vesico-sphincteriens neurogenes.  
 AUTHOR: Amarencó G  
 CORPORATE SOURCE: Laboratoire d'Urodynamique et de Neurophysiologie, Centre Hospitalier Robert Ballanger, Aulnay-Sous-Bois.  
 SOURCE: ANNALES D'UROLOGIE, (1993) 27 (6-7) 313-20.  
 Journal code: 6AD; 0212342. ISSN: 0003-4401.  
 PUB. COUNTRY: France  
 Journal; Article; (JOURNAL ARTICLE)  
 LANGUAGE: French  
 FILE SEGMENT: Priority Journals  
 ENTRY MONTH: 199403  
 ENTRY DATE: Entered STN: 19940314  
 Last Updated on STN: 19940314  
 Entered Medline: 19940303  
 AB The evaluation of neurogenic vesicosphincteric disorders is based on clinical examination and instrumental assessment, composed of urodynamic and perineal electrophysiological studies allowing a better understanding of the pathophysiology, aetiopathogenesis and course of the symptoms. The treatment of urinary symptoms, whether medical, surgical, mixed or involving various rehabilitation techniques, must satisfy a dual objective of individual and psychosocial comfort and preservation of the patient's uro-nephrological future.

L118 ANSWER 13 OF 73 MEDLINE  
 ACCESSION NUMBER: 92173433 MEDLINE  
 DOCUMENT NUMBER: 92173433 PubMed ID: 1724398  
 TITLE: Current concepts in the treatment of genitourinary tract disorders in the older individual.  
 AUTHOR: Atala A; Amin M  
 CORPORATE SOURCE: Department of Surgery, University of Louisville School of Medicine, Kentucky.  
 SOURCE: DRUGS AND AGING, (1991 May) 1 (3) 176-93. Ref: 87  
 Journal code: BEK; 9102074. ISSN: 1170-229X.  
 PUB. COUNTRY: New Zealand  
 Journal; Article; (JOURNAL ARTICLE)  
 General Review; (REVIEW)  
 (REVIEW LITERATURE)  
 LANGUAGE: English  
 FILE SEGMENT: Priority Journals  
 ENTRY MONTH: 199204  
 ENTRY DATE: Entered STN: 19920424  
 Last Updated on STN: 19960129

Entered Medline: 19920408

AB Genitourinary problems, including neurogenic dysfunction, impotence, prostatism, urinary tract infections, and prostate cancer, are common in the elderly, and most of the symptoms can be alleviated through pharmacological management. Patients with neurogenic dysfunction who present with symptoms such as incontinence and urinary retention can be appropriately managed with bladder and sphincter relaxants or stimulants. Anticholinergic agents in the form of oxybutynin, flavoxate, and propantheline are effective bladder relaxants, and phenoxybenzamine, prazosin, and terazosin are commonly used as sphincter relaxants. Bethanechol chloride is the agent most commonly used to stimulate bladder contraction, but physicians should be careful when prescribing it for elderly patients with cardiovascular problems. Organic and psychogenic causes of impotence usually overlap, and oral agents have limited use in the treatment process. The use of yohimbine has increased recently, but its value and rate of success remains questionable. Testosterone is being used widely to treat impotence, but it is only helpful to patients with hypogonadism and should be used with discretion in the elderly, who have a high incidence of prostate cancer. Vasoactive intracavernous pharmacotherapy, on the other hand, is a recently discovered alternative to testosterone with promising results. Although the treatment of choice for benign prostatic hypertrophy is surgery, there have been important pharmacological advances in treating this disorder. alpha-Adrenergic antagonists and anti-androgenic agents have been found to relieve the symptoms of prostatic enlargement. The use of chemotherapeutic and antibiotic agents to treat and suppress acute and chronic urinary tract infections is reviewed; these are second only to pulmonary infections as the most frequent cause of febrile episodes in patients over the age of 65. Lower urinary tract infections can be treated with almost any antibacterial agent. Upper urinary tract infections require full genitourinary evaluation and appropriate antibiotics should be used according to the urine culture sensitivity studies. With the advent of new hormonal agents, more choices are now available for the management of prostate cancer, which is the second most common malignancy in men. Diethylstilbestrol (stilboestrol), an oral estrogen, remains a commonly used agent to achieve castrate levels of androgens in advanced prostatic carcinoma. Agonist analogues, such as goserelin and leuprorelin, of gonadotrophin-releasing hormone (GnRH) [luteinising hormone-releasing hormone (LHRH); or gonadorelin] achieve the same results as diethylstilbestrol but without the cardiovascular side effects. Antiandrogens are also being used in combination with GnRH agonists to produce complete androgen blockage, with mixed results.

Canine

①

L118 ANSWER 14 OF 73 MEDLINE  
ACCESSION NUMBER: 87203766 MEDLINE  
DOCUMENT NUMBER: 87203766 PubMed ID: 2883640  
TITLE: Pharmacotherapy of congestive heart failure. An evaluation of recent advances.  
AUTHOR: Alpert M A  
SOURCE: POSTGRADUATE MEDICINE, (1987 May 1) 81 (6) 257-67.  
Journal code: PFK; 0401147. ISSN: 0032-5481.  
PUB. COUNTRY: United States  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: English  
FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals  
ENTRY MONTH: 198706  
ENTRY DATE: Entered STN: 19900303  
Last Updated on STN: 19950206  
Entered Medline: 19870605

AB Vasodilator therapy represents an important step forward in the treatment of chronic left ventricular failure. Angiotensin converting enzyme (ACE) inhibitors appear to be the most versatile vasodilators, but selected direct-acting vasodilators, sympathetic inhibitors (prazosin), and

possibly calcium channel antagonists (nifedipine and diltiazem) may be useful in certain situations. The bipyridine derivatives possess potent inotropic and vasodilating properties. The efficacy of intravenously administered amrinone and milrinone has been proven in the treatment of refractory left ventricular failure. Whether oral administration of milrinone or other bipyridine derivatives will prove to be safe and effective in the long-term treatment of chronic left ventricular failure remains uncertain.

L118 ANSWER 15 OF 73 MEDLINE  
ACCESSION NUMBER: 86094084 MEDLINE  
DOCUMENT NUMBER: 86094084 PubMed ID: 2867541  
TITLE: Voiding problems in women. One physician's perspective on evaluation and therapy.  
AUTHOR: Giesy J D  
SOURCE: POSTGRADUATE MEDICINE, (1986 Jan) 79 (1) 271-8.  
Journal code: PFK; 0401147. ISSN: 0032-5481.  
PUB. COUNTRY: United States  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: English  
FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals  
ENTRY MONTH: 198602  
ENTRY DATE: Entered STN: 19900321  
Last Updated on STN: 19950206  
Entered Medline: 19860210

AB Voiding problems are prevalent in women. Cost-effective evaluation can be performed on the basis of a voiding calendar and simple office urodynamic studies. The numerous treatment options include pelvic support exercises, drug therapy, bladder irrigation, hydraulic distention, intermittent self-catheterization, and various surgical procedures.

L118 ANSWER 16 OF 73 MEDLINE  
ACCESSION NUMBER: 86220704 MEDLINE  
DOCUMENT NUMBER: 86220704 PubMed ID: 2872080  
TITLE: [Spasmolytics in the combined therapy of bronchial asthma].  
Spazmolitiki v kombinirovannoi terapii bronkhial'noi astmy.  
AUTHOR: Zarudii F S  
SOURCE: FARMAKOLOGIJA I TOKSIKOLOGIJA, (1986 Mar-Apr) 49 (2) 102-3.  
Ref: 52  
Journal code: ETR; 16920420R. ISSN: 0014-8318.  
PUB. COUNTRY: USSR  
Journal; Article; (JOURNAL ARTICLE)  
General Review; (REVIEW)  
LANGUAGE: Russian  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 198607  
ENTRY DATE: Entered STN: 19900321  
Last Updated on STN: 19950206  
Entered Medline: 19860703

L118 ANSWER 17 OF 73 MEDLINE  
ACCESSION NUMBER: 86124237 MEDLINE  
DOCUMENT NUMBER: 86124237 PubMed ID: 2868553  
TITLE: [Pharmacological treatment of urinary incontinence and difficulty in emptying the bladder in women].  
Farmakologisk behandling af urin-inkontinens og blaeretomningsbesvaer hos kvinder.  
AUTHOR: Thind P; Lose G  
SOURCE: UGESKRIFT FOR LAEGER, (1985 Dec 2) 147 (49) 3989-92.  
Journal code: WM8; 0141730. ISSN: 0041-5782.  
PUB. COUNTRY: Denmark  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: Danish

FILE SEGMENT: Priority Journals  
ENTRY MONTH: 198603  
ENTRY DATE: Entered STN: 19900321  
Last Updated on STN: 19950206  
Entered Medline: 19860307

L118 ANSWER 18 OF 73 MEDLINE  
ACCESSION NUMBER: 85283508 MEDLINE  
DOCUMENT NUMBER: 85283508 PubMed ID: 2863025  
TITLE: Pharmacological treatment of lower urinary tract dysfunction.  
AUTHOR: Wein A J  
SOURCE: CLINICS IN OBSTETRICS AND GYNAECOLOGY, (1985 Jun) 12 (2) 379-94.  
Journal code: DGA; 7509601. ISSN: 0306-3356.  
PUB. COUNTRY: ENGLAND: United Kingdom  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 198510  
ENTRY DATE: Entered STN: 19900320  
Last Updated on STN: 19950206  
Entered Medline: 19851007

L118 ANSWER 19 OF 73 MEDLINE  
ACCESSION NUMBER: 85193730 MEDLINE  
DOCUMENT NUMBER: 85193730 PubMed ID: 2859679  
TITLE: Pharmacologic treatment of lower urinary tract dysfunction in the female patient.  
AUTHOR: Wein A J  
SOURCE: UROLOGIC CLINICS OF NORTH AMERICA, (1985 May) 12 (2) 259-69. Ref: 75  
Journal code: WRN; 0423221. ISSN: 0094-0143.  
PUB. COUNTRY: United States  
Journal; Article; (JOURNAL ARTICLE)  
General Review; (REVIEW)  
LANGUAGE: English  
FILE SEGMENT: Abridged Index Medicus Journals; Priority Journals  
ENTRY MONTH: 198505  
ENTRY DATE: Entered STN: 19900320  
Last Updated on STN: 19950206  
Entered Medline: 19850531

AB As a result of the renewed interest in the neuropharmacology and neurophysiology of the urinary bladder and its outlet, pharmacologic therapy now exists that is helpful in the management of many types of voiding dysfunctions. This article summarizes the pharmacologic principles upon which this drug therapy is based and shows how pharmacologic treatment fits into a functional scheme of therapy for disorders of micturition, here specifically related to the female patient with lower urinary tract dysfunction.

L118 ANSWER 20 OF 73 MEDLINE  
ACCESSION NUMBER: 85100158 MEDLINE  
DOCUMENT NUMBER: 85100158 PubMed ID: 6151442  
TITLE: Anticholinergics, cromolyn, and other occasionally useful drugs.  
AUTHOR: George R B; Payne D K  
SOURCE: CLINICS IN CHEST MEDICINE, (1984 Dec) 5 (4) 685-93. Ref: 70  
Journal code: DLR; 7907612. ISSN: 0272-5231.  
PUB. COUNTRY: United States  
Journal; Article; (JOURNAL ARTICLE)  
General Review; (REVIEW)



LANGUAGE: English  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 198503  
ENTRY DATE: Entered STN: 19900320  
Last Updated on STN: 19950206  
Entered Medline: 19850315

AB In asthmatics who are not controlled with beta-adrenergic agonists, theophylline and corticosteroids, the addition of anticholinergics may be beneficial. Cromolyn and the calcium-channel blocking agents are useful in preventing asthma attacks in some patients. Some other agents that have been proposed for the treatment of asthma are discussed briefly.

L118 ANSWER 21 OF 73 MEDLINE

ACCESSION NUMBER: 84199655 MEDLINE  
DOCUMENT NUMBER: 84199655 PubMed ID: 6720471  
TITLE: [Pharmacology and drug treatment of urinary incontinence in women].  
Pharmacologie et traitement medical de l'incontinence urinaire chez la femme.  
AUTHOR: Jurascheck F; Jurascheck E; Sengler J; Fernandez R  
SOURCE: ACTA UROLOGICA BELGICA, (1984 Apr) 52 (2) 224-36.  
Journal code: 26Y; 0377045. ISSN: 0001-7183.  
PUB. COUNTRY: Belgium  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: French  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 198406  
ENTRY DATE: Entered STN: 19900319  
Last Updated on STN: 19900319  
Entered Medline: 19840619

L118 ANSWER 22 OF 73 MEDLINE

ACCESSION NUMBER: 84196964 MEDLINE  
DOCUMENT NUMBER: 84196964 PubMed ID: 6144193  
TITLE: [Problems in the current treatment of the bronchial obstruction syndrome in bronchial asthma patients].  
Nekotorye voprosy sovremennogo lecheniia bronkhoobturatsionnogo sindroma u bol'nykh bronkhial'noi astmoi.  
AUTHOR: Fedoseev G B; Nemtsov V I  
SOURCE: TERAPEVTICHESKII ARKHIV, (1984) 56 (3) 47-50.  
Journal code: VLU; 2984818R. ISSN: 0040-3660.  
PUB. COUNTRY: USSR  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: Russian  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 198406  
ENTRY DATE: Entered STN: 19900319  
Last Updated on STN: 19950206  
Entered Medline: 19840618

L118 ANSWER 23 OF 73 MEDLINE

ACCESSION NUMBER: 84015614 MEDLINE  
DOCUMENT NUMBER: 84015614 PubMed ID: 6137808  
TITLE: [Effect of the blockaders of alpha-adrenergic and muscarinic receptors and eufhylline in chronic obstructive bronchitis].  
Dzialanie blokerow receptorow alfa-adrenergicznych, muskarynowych i eufiliny w przewleklym obturacyjnym zapaleniu oskrzeli.  
AUTHOR: Krasnowska M; Kraus-Filarska M; Suchnicka R  
SOURCE: PNEUMONOLOGIA POLSKA, (1983 Apr) 51 (4) 209-15.  
Journal code: PAF; 7605692. ISSN: 0376-4761.

PUB. COUNTRY: Poland  
(CLINICAL TRIAL)  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: Polish  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 198311  
ENTRY DATE: Entered STN: 19900319  
Last Updated on STN: 19950206  
Entered Medline: 19831123

L118 ANSWER 24 OF 73 MEDLINE  
ACCESSION NUMBER: 82219120 MEDLINE  
DOCUMENT NUMBER: 82219120 PubMed ID: 7087754  
TITLE: [Medical treatment of kidney colic].  
Medikamentöse Behandlung der Nierenkolik.  
AUTHOR: Muller L; May P  
SOURCE: MEDIZINISCHE WELT, (1982 May 7) 33 (18) 678-82.  
Journal code: MIM; 0376641. ISSN: 0025-8512.  
PUB. COUNTRY: GERMANY, WEST: Germany, Federal Republic of  
(CLINICAL TRIAL)  
Journal; Article; (JOURNAL ARTICLE)  
(RANDOMIZED CONTROLLED TRIAL)  
LANGUAGE: German  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 198208  
ENTRY DATE: Entered STN: 19900317  
Last Updated on STN: 19980206  
Entered Medline: 19820826

L118 ANSWER 25 OF 73 MEDLINE  
ACCESSION NUMBER: 82081747 MEDLINE  
DOCUMENT NUMBER: 82081747 PubMed ID: 6118853  
TITLE: [The effects of drugs on vesico-urethral function].  
Farmakas indvirkning pa blaere-uretrafunktioner.  
AUTHOR: Gerstenberg T C; Andersen J T; Walter S  
SOURCE: NORDISK MEDICIN, (1981 Dec) 96 (12) 310-2.  
Journal code: O4K; 0401001. ISSN: 0029-1420.  
PUB. COUNTRY: Sweden  
Journal; Article; (JOURNAL ARTICLE)  
LANGUAGE: Danish  
FILE SEGMENT: Priority Journals  
ENTRY MONTH: 198202  
ENTRY DATE: Entered STN: 19900316  
Last Updated on STN: 19950206  
Entered Medline: 19820222

AB Disturbances of the bladder-urethra function may lead either to frequency, urinary incontinence, or urinary retention. A survey is given on the drugs most frequently used in the treatment of lower urinary tract dysfunction. Special attention is drawn to the use of parasympatholytics in the treatment of hyperactive detrusor function (unstable bladder), sympathomimetics in the treatment of decreased urethral resistance, parasympathomimetics in the treatment of hypoactive detrusor function and alpha-adrenergic blocking agents in the treatment of increased urethral resistance.

L118 ANSWER 26 OF 73 MEDLINE  
ACCESSION NUMBER: 81045206 MEDLINE  
DOCUMENT NUMBER: 81045206 PubMed ID: 6903543  
TITLE: Urinary continence/incontinence. Helpful drugs: depending on the cause of incontinence, medication may be the answer.  
AUTHOR: Finkbeiner A E  
SOURCE: GERIATRIC NURSING, (1980 Nov-Dec) 1 (4) 270-1.  
Journal code: FW7; 8309633. ISSN: 0197-4572.

PUB. COUNTRY: United States  
 Journal; Article; (JOURNAL ARTICLE)  
 LANGUAGE: English  
 FILE SEGMENT: Nursing Journals  
 ENTRY MONTH: 198101  
 ENTRY DATE: Entered STN: 19900316  
 Last Updated on STN: 20000303  
 Entered Medline: 19810129

L118 ANSWER 27 OF 73 MEDLINE  
 ACCESSION NUMBER: 80187758 MEDLINE  
 DOCUMENT NUMBER: 80187758 PubMed ID: 6103504  
 TITLE: [Drug therapy of urinary incontinence].  
 Medikamentöse Therapie der Harninkontinenz.  
 AUTHOR: Schutz W  
 SOURCE: MEDIZINISCHE KLINIK, (1980 Feb 1) 75 (3) 127-31.  
 Journal code: M4E; 0376637. ISSN: 0025-8458.  
 PUB. COUNTRY: GERMANY, WEST: Germany, Federal Republic of  
 Journal; Article; (JOURNAL ARTICLE)  
 LANGUAGE: German  
 FILE SEGMENT: Priority Journals  
 ENTRY MONTH: 198007  
 ENTRY DATE: Entered STN: 19900315  
 Last Updated on STN: 19950206  
 Entered Medline: 19800722

L118 ANSWER 28 OF 73 MEDLINE  
 ACCESSION NUMBER: 72041351 MEDLINE  
 DOCUMENT NUMBER: 72041351 PubMed ID: 4399149  
 TITLE: Effect of L-dopa, adrenergic -blockers and anticholinergic  
 agents on the tremorine-tremor in mice.  
 AUTHOR: Watanabe H; Munakata H; Chen S C; Kasuya Y  
 SOURCE: ARCHIVES INTERNATIONALES DE PHARMACODYNAMIE ET DE THERAPIE,  
 (1971 Oct) 193 (2) 372-80.  
 Journal code: 7EK; 0405353. ISSN: 0003-9780.  
 PUB. COUNTRY: Belgium  
 Journal; Article; (JOURNAL ARTICLE)  
 LANGUAGE: English  
 FILE SEGMENT: Priority Journals  
 ENTRY MONTH: 197201  
 ENTRY DATE: Entered STN: 19900310  
 Last Updated on STN: 19970203  
 Entered Medline: 19720125

L118 ANSWER 29 OF 73 HCAPLUS COPYRIGHT 2001 ACS DUPLICATE 1  
 ACCESSION NUMBER: 2001:228701 HCAPLUS  
 DOCUMENT NUMBER: 134:247264  
 TITLE: Treatment of lower urinary tract symptoms with  
 muscarinic and .alpha.-adrenergic antagonists and  
 5.alpha.-reductase inhibitors, and pharmaceutical  
 compositions for use therein  
 INVENTOR(S): Stoner, Elizabeth; Drake, Paul J.; Bach, Mark A.  
 PATENT ASSIGNEE(S): Merck & Co., Inc., USA  
 SOURCE: PCT Int. Appl., 20 pp.  
 CODEN: PIXXD2  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001021167	A1	20010329	WO 2000-US25534	20000918

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN,  
CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR,  
HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC, LK, LR, LS, LT, LU,  
LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD,  
SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU,  
ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM  
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY,  
DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ,  
CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG

PRIORITY APPLN. INFO.: US 1999-155357 P 19990922

OTHER SOURCE(S): MARPAT 134:247264

AB A medical condition in men known as Lower Urinary Tract Symptoms (LUTS) is treated by the administration of a muscarinic receptor antagonist in combination with at least one of a 5.alpha.-reductase inhibitor and an .alpha.-adrenergic receptor blocker.

IT 5633-20-5, Oxybutynin 19216-56-9,  
Prazosin 26844-12-2, Indoramin  
63590-64-7, Terazosin 74191-85-8,  
Doxazosin 90402-40-7, Abanoquil  
124937-51-5, Tolterodine 133099-04-4,  
Darifenacin

RL: BAC (Biological activity or effector, except adverse); THU  
(Therapeutic use); BIOL (Biological study); USES (Uses)  
(muscarinic and .alpha.-adrenergic antagonists and 5.alpha.-reductase  
inhibitors for treatment of lower urinary tract symptoms , and  
pharmaceutical compns.)

REFERENCE COUNT: 4

REFERENCE(S): (1) Anon; WO 9531190 A1 1995 HCAPLUS  
(2) de Mey, C; Eur Urol 1998, V33(5), P481 HCAPLUS  
(3) Debruyne, F; Eur Urol 1998, V34(3), P169 HCAPLUS  
(4) Nakamura, K; HCAPLUS

L118 ANSWER 30 OF 73 HCAPLUS COPYRIGHT 2001 ACS DUPLICATE 2

ACCESSION NUMBER: 2001:594376 HCAPLUS

DOCUMENT NUMBER: 135:185453

TITLE: Pharmaceutical combinations for treating lower urinary  
tract disfunctions

INVENTOR(S): Wyllie, Michael Grant

PATENT ASSIGNEE(S): Pfizer Products Inc., USA

SOURCE: Eur. Pat. Appl., 13 pp.

CODEN: EPXXDW

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
EP 1123705	A1	20010816	EP 2001-1301085	20010207

R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,  
IE, SI, LT, LV, FI, RO

US 2001044438	A1	20011122	US 2001-778290	20010207
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PRIORITY APPLN. INFO.: US 2000-181310 P 20000209

AB Pharmaceutical combinations suitable for treating the lower urinary tract symptoms assocd. with benign prostatic hyperplasia in men contain an .alpha.-adrenoceptor antagonist and a muscarinic antagonist. The combinations of the invention are particularly suitable for treating moderate or severe lower urinary tract symptoms. Thus, tablet contained doxazosin mesylate 4.05, microcryst. cellulose 125.28, lactose 66.67, sodium starch glycolate 2.00, and Mg stearate 2.00% by wt.

IT 5633-20-5, Oxybutynin 19216-56-9,  
Prazosin 26844-12-2, Indoramine  
63590-64-7, Terazosin 74191-85-8,

Doxazosin 77883-43-3, Doxazosin mesylate  
 90402-40-7, Abanoquil 124937-51-5,  
 Tolterodine 133099-04-4, Darifenacin  
 133099-07-7, Darifenacin hydrobromide  
 210538-44-6

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
 (pharmaceutical combinations for treating lower urinary tract  
 disfunctions)

REFERENCE COUNT: 9

REFERENCE(S): (3) Merck & Co Inc; WO 0121167 A 2001 HCAPLUS  
 (4) Pfizer Inc; WO 9830560 A 1998 HCAPLUS  
 (5) Pfizer Research And Development Co; WO 9709980 A  
 1997 HCAPLUS  
 (6) Sepracor Inc; WO 9409785 A 1994 HCAPLUS  
 (7) Serels, S; NEUROUROLOGY AND URODYNAMICS 1998,  
 V17(1), P31 HCAPLUS

ALL CITATIONS AVAILABLE IN THE RE FORMAT

L118 ANSWER 31 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 2001:661418 HCAPLUS

DOCUMENT NUMBER: 135:216011

TITLE: preparation of 4-amino-6,7-dimethoxy-2-(5-  
 methanesulfonamido-1,2,3,4-tetrahydroisoquinol-2-yl)-5-  
 (2-pyridyl)quinazoline mesylate and polymorphs

INVENTOR(S): Basford, Patricia Ann; Hodgson, Paul Blaise

PATENT ASSIGNEE(S): Pfizer Limited, UK; Pfizer Inc.

SOURCE: PCT Int. Appl., 39 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001064672	A1	20010907	WO 2001-IB244	20010223
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG			

PRIORITY APPLN. INFO.: GB 2000-5200 A 20000303  
 GB 2000-15900 A 20000628

AB The polymorphs of 4-amino-6,7-dimethoxy-2-(5-methanesulfonamido-1,2,3,4-tetrahydroisoquinol-2-yl)-5-(2-pyridyl)quinazoline mesylate (I) are disclosed. The invention also relates to substantially pure anhyd. cryst. polymorphic forms of the free base. The compds. are particularly useful in the treatment of benign prostatic hyperplasia. Thus, polymorphs I were prepd. by the reaction of 4-amino-6,7-dimethoxy-2-chloro-5-(2-pyridyl)quinazoline with N-(1,2,3,4-tetrahydro-5-isoquinolyl)methanesulfonamide-HCl in the presence of Et3N.

IT 210538-44-6P

RL: PRP (Properties); SPN (Synthetic preparation); THU (Therapeutic use);  
 BIOL (Biological study); PREP (Preparation); USES (Uses)  
 (prepn. of aminomethanesulfonamido(tetrahydroisoquinolyl)(pyridyl)quina  
 zoline mesylate and polymorphs)

REFERENCE COUNT: 2

REFERENCE(S): (1) Merck Patent Gmbh; WO 8801998 A 1988 HCAPLUS  
 (2) Pfizer Ltd; WO 9830560 A 1998 HCAPLUS

L118 ANSWER 32 OF 73 HCAPLUS COPYRIGHT 2001 ACS  
 ACCESSION NUMBER: 2001:338762 HCAPLUS  
 DOCUMENT NUMBER: 134:362292  
 TITLE: Methods of determining individual hypersensitivity to  
 a pharmaceutical agent from gene expression profile  
 INVENTOR(S): Farr, Spencer  
 PATENT ASSIGNEE(S): Phase-1 Molecular Toxicology, USA  
 SOURCE: PCT Int. Appl., 222 pp.  
 CODEN: PIXXD2  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001032928	A2	20010510	WO 2000-US30474	20001103
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
PRIORITY APPLN. INFO.:			US 1999-165398	P 19991105
			US 2000-196571	P 20000411

AB The invention discloses methods, gene databases, gene arrays, protein arrays, and devices that may be used to det. the hypersensitivity of individuals to a given agent, such as drug or other chem., in order to prevent toxic side effects. In one embodiment, methods of identifying hypersensitivity in a subject by obtaining a gene expression profile of multiple genes assocd. with hypersensitivity of the subject suspected to be hypersensitive, and identifying in the gene expression profile of the subject a pattern of gene expression of the genes assocd. with hypersensitivity are disclosed. The gene expression profile of the subject may be compared with the gene expression profile of a normal individual and a hypersensitive individual. The gene expression profile of the subject that is obtained may comprise a profile of levels of mRNA or cDNA. The gene expression profile may be obtained by using an array of nucleic acid probes for the plurality of genes assocd. with hypersensitivity. The expression of the genes predetd. to be assocd. with hypersensitivity is directly related to prevention or repair of toxic damage at the tissue, organ or system level. Gene databases arrays and app. useful for identifying hypersensitivity in a subject are also disclosed.

IT 5633-20-5, Oxybutynin 19216-56-9,  
 Prazosin 63590-64-7, Terazosin  
 74191-85-8, Doxazosin 124937-51-5,  
 Tolterodine

RL: BAC (Biological activity or effector, except adverse); BIOL  
 (Biological study)

(methods of detg. individual hypersensitivity to a pharmaceutical agent  
 from gene expression profile)

L118 ANSWER 33 OF 73 HCAPLUS COPYRIGHT 2001 ACS  
 ACCESSION NUMBER: 2001:185528 HCAPLUS  
 DOCUMENT NUMBER: 134:242644  
 TITLE: Methods and compositions for preventing and treating  
 urinary tract disorders  
 INVENTOR(S): Neal, Gary W.

PATENT ASSIGNEE(S): Androsolutions, Inc., USA  
 SOURCE: PCT Int. Appl., 32 pp.  
 CODEN: PIXXD2  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 2  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001017480	A2	20010315	WO 2000-US24685	20000908
WO 2001017480	A3	20011101		

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN,  
 CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR,  
 HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT,  
 LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU,  
 SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, UZ, VN, YU,  
 ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM  
 RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY,  
 DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ,  
 CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG

PRIORITY APPLN. INFO.: US 1999-152902 P 19990909

AB The present invention relates to methods, compns., devices and kits for the prevention and treatment of urinary tract disorders in mammals, including, but not limited to, urinary incontinence of any etiol., urinary hesitancy, fibrosis of the urinary tract, urinary dribbling, cystitis of any etiol., urinary frequency, and bladder cancer. The present invention provides methods for preventing and treating urinary tract disorders in mammals by administration of a therapeutic compd. to mucosal membranes in the lower urinary tract of the mammal. The present invention also provides devices for administering a therapeutic compd. to mucosal membranes in the lower urinary tract of the mammal. PGE-2 was added in a base matrix contg. tripalmitin and Me palmitate, and the mixt. was drawn into rigid tube made of high-d. polyethylene to obtain soft suppositories.

IT 5633-20-5, Oxybutynin 19237-84-4,  
 Prazosin hydrochloride 74191-85-8, Doxazosin  
 124937-51-5, Tolterodine

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
 (treatment of urinary tract disorders by administering drug to mucosal membranes of lower urinary tract)

L118 ANSWER 34 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 2001:41675 HCAPLUS

DOCUMENT NUMBER: 135:81

TITLE: New roles for muscarinic receptors in the pathophysiology of lower urinary tract symptoms

AUTHOR(S): Andersson, K.-E.

CORPORATE SOURCE: Department of Clinical Pharmacology, Lund University Hospital, Lund, Swed.

SOURCE: BJU Int. (2000), 86(Suppl. 2), 36-43

CODEN: BJINFO; ISSN: 1464-4096

PUBLISHER: Blackwell Science Ltd.

DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

AB A review with 77 refs. The efficacy of both antimuscarinic drugs and .alpha.1-adrenoceptor antagonists in the treatment of lower urinary tract symptoms (LUTS) supports an important role for both muscarinic receptors and .alpha.1-adrenoceptors in the pathogenesis of the symptoms, and suggests that a combination of antimuscarinic drugs and .alpha.1-adrenoceptor antagonists may have treatment advantages.

REFERENCE COUNT: 77

REFERENCE(S): (2) Andersson, K; BJU Int 1999, V84, P923 HCAPLUS  
 (4) Andersson, K; Prostate 1997, V30, P202 HCAPLUS

Searched by Barb O'Bryen STIC 308-4291

- (6) Arvidsson, U; J Comp Neurol 1997, V378, P454  
HCAPLUS  
(8) Bayliss, M; J Urol 1999, V162, P1833 HCAPLUS  
(9) Bonev, A; Am J Physiol 1993, V265, PC1723 HCAPLUS  
ALL CITATIONS AVAILABLE IN THE RE FORMAT

L118 ANSWER 35 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 2001:54908 HCAPLUS  
DOCUMENT NUMBER: 134:347947  
TITLE: Predicting the probable receptor targets for potential  
drugs based on the assessment of their similarity with  
endogenous ligands  
AUTHOR(S): Borodina, Yulia; Filimonov, Dmitrii; Poroikov,  
Vladimir  
CORPORATE SOURCE: Institute of Biomedical Chemistry, RAMS, Moscow,  
119832, Russia  
SOURCE: Proc. ECSOC-1: First Int. Electron. Conf. Synth. Org.  
Chem.; Proc. ECSOC-2: Second Int. Electron. Conf.  
Synth. Org. Chem. (1999), Meeting Date 1997-1998,  
278-284. Editor(s): Lin, Shu-Kun; Pombo-Villar,  
Esteban. Molecular Diversity Preservation  
International: Basel, Switz.  
CODEN: 69ASBO  
DOCUMENT TYPE: Conference; (computer optical disk)  
LANGUAGE: English

AB A computer system called SIMEST was developed for multiple similarity  
assessment of a new compd. with highly selective small ligands of known  
receptors. The principal idea is that the similar compds. will interact  
with the same receptors. SIMEST includes a software for similarity estn.  
between a pattern mol. and each of the ligands; and a database of highly  
selective small ligands (endogenic bioregulators and their analogs).

L118 ANSWER 36 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1999:683674 HCAPLUS  
DOCUMENT NUMBER: 132:160765  
TITLE: Search for the most common properties of extracellular  
receptor agonists and antagonists in the in vitro  
transcription as the model  
AUTHOR(S): Prokopenko, V. V.; Kholodovych, V. V.; Luik, A. I.  
CORPORATE SOURCE: Inst. Bioorg. Khim. i Neftekhim., NAN Ukrainy, Kiev,  
252660, Ukraine  
SOURCE: Biopolim. Kletka (1999), 15(1), 23-27  
CODEN: BIKLEK; ISSN: 0233-7657  
PUBLISHER: Institut Molekulyarnoi Biologii i Genetiki NAN Ukrainy  
DOCUMENT TYPE: Journal  
LANGUAGE: Russian

AB To search for the most common properties of extracellular receptor  
agonists and antagonists the study of their action on the bacteriophage T7  
RNA-polymerase in vitro transcription was undertaken. Propranolol  
(.beta.-adrenoceptors antagonist), prazosin (.alpha.1-adrenoceptors  
antagonist), yohimbine, (a2-adrenoceptors antagonist), atropine  
(muscarinic antagonist), isoproterenol (.beta.-adrenoceptors agonist),  
phenylephrine (.alpha.1-adrenoceptors agonist), clonidine  
(a2-adrenoceptors agonist), carbachol (muscarinic agonist) and synthetical  
tripeptide fMLP (polymorphonuclear leukocytes chemotaxis receptors  
agonist) were studied. It was shown that agonists at the concn. of  
10-5-10-4 M either do not affect transcription or elevate its activity as  
much as 8-21%. Antagonists at the same concns. inhibit the polymerase  
reaction making it 15-45% less active. The structural differences of the  
agonists and antagonists are discussed.

L118 ANSWER 37 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1998:490639 HCAPLUS



DOCUMENT NUMBER: 129:136176  
 TITLE: Quinoline and quinazoline compounds useful in therapy, particularly in the treatment of benign prostatic hyperplasia  
 INVENTOR(S): Fox, David Nathan Abraham  
 PATENT ASSIGNEE(S): Pfizer Ltd., UK; Pfizer Inc.; Fox, David Nathan Abraham  
 SOURCE: PCT Int. Appl., 69 pp.  
 CODEN: PIXXD2  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9830560	A1	19980716	WO 1998-EP143	19980106
W: AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CU, CZ, DE, DK, EE, ES, FI, GB, GE, HU, ID, IL, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, TJ, TM, TR, TT, UA, UG, US, UZ, VN, YU, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
RW: GH, GM, KE, LS, MW, SD, SZ, UG, ZW, AT, BE, CH, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG				
AU 9862088	A1	19980803	AU 1998-62088	19980106
AU 724990	B2	20001005		
EP 968208	A1	20000105	EP 1998-904058	19980106
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, PT, IE, SI, LT, LV, FI, RO				
BR 9807068	A	20000502	BR 1998-7068	19980106
JP 2000507966	T2	20000627	JP 1998-530565	19980106
ZA 9800166	A	19990709	ZA 1998-166	19980109
US 6169093	B1	20010102	US 1999-341228	19990707
NO 9903396	A	19990709	NO 1999-3396	19990709
PRIORITY APPLN. INFO.:			GB 1997-504	A 19970111
			WO 1998-EP143	W 19980106

OTHER SOURCE(S): MARPAT 129:136176

AB I [R1 = C1-4 alkoxy optionally substituted by one or more fluorine atoms; R2 = H, C1-6 alkoxy optionally substituted by one or more fluorine atoms; R3 = 5- or 6-membered heterocyclic ring, the ring being optionally substituted; R4 = 4-, 5-, 6- or 7-membered heterocyclic ring, the ring being optionally fused to a benzene ring or a 5- or 6-membered heterocyclic ring, the ring system as a whole being optionally substituted; X = CH, N; L is absent or represents a N-contg. cyclic group or chain], useful in treatment of benign prostatic hyperplasia, were prepd. E.g., 4-amino-6,7-dimethoxy-2-[4-(4-morpholinecarbonyl)-1,4-diazepan-1-yl]-5-(oxazol-2-yl)quinoline was prepd.

IT 210538-44-6P

RL: BAC (Biological activity or effector, except adverse); SPN (Synthetic preparation); THU (Therapeutic use); BIOL (Biological study); PREP (Preparation); USES (Uses)

(prepn. of quinoline and quinazoline derivs. useful in treatment of benign prostatic hyperplasia)

L118 ANSWER 38 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1998:124046 HCAPLUS

DOCUMENT NUMBER: 128:196684

TITLE: Pharmaceutical compositions containing a reverse thermally viscosifying polymer network

INVENTOR(S): Ron, Eyal S.; Bromberg, Lev; Orkisz, Michal; Kearney, Marie; Luczak, Scott; Timm, Mary J.; Wrobel, Stanley J.

PATENT ASSIGNEE(S): Gel Sciences, Inc., USA  
 SOURCE: PCT Int. Appl., 105 pp.  
 CODEN: PIXXD2  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9806438	A2	19980219	WO 1997-US13988	19970812
WO 9806438	A3	19980625		
W: CA, JP				
RW: AT, BE, CH, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
EP 920338	A2	19990609	EP 1997-937165	19970812
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI				
JP 2000516614	T2	20001212	JP 1998-509898	19970812
PRIORITY APPLN. INFO.:				
			US 1996-23996	P 19960812
			US 1996-25974	P 19960916
			US 1996-28183	P 19961015
			US 1996-30798	P 19961114
			US 1997-34174	P 19970102
			US 1997-34454	P 19970102
			WO 1997-US13988	W 19970812

AB A pharmaceutical compn. includes a pharmaceutically acceptable carrier, comprising a reverse thermally viscosifying polymer network. The polymer network includes at least one responsive polymer component, said responsive component capable of aggregation in soln. in response to an environmental stimulus and at least one structural component, said structural component exhibiting self-repulsive interactions over use conditions. The responsive component is randomly bonded to said structural component and the polymer network characterized in that it viscosifies in response to said environmental stimulus. The compn. further includes a pharmaceutically active agent which imparts a pharmaceutical effect, said carrier and said agent disposed within an aq.-based medium. The compn. is suitable for administration of the pharmaceutical agent across dermal, otic, rectal, vaginal, ophthalmic, esophageal and nasal mucosal membranes. A compn. was prepd. from Pluronic F27 and poly(acrylic acid).

L118 ANSWER 39 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1998:146574 HCAPLUS  
 DOCUMENT NUMBER: 128:184708  
 TITLE: Topical pharmaceutical compositions comprising bioadhesive carrier, a solvent and a clay  
 INVENTOR(S): Kanios, David P.; Gentile, Joseph A.; Mantelle, Juan A.; Sablotsky, Steven  
 PATENT ASSIGNEE(S): Noven Pharmaceuticals, Inc., USA  
 SOURCE: U.S., 18 pp. Cont.-in-part of U.S. 5,446,070.  
 CODEN: USXXAM  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 7  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 5719197	A	19980217	US 1995-477361	19950607
US 4814168	A	19890321	US 1988-164482	19880304
US 4994267	A	19910219	US 1989-295847	19890111
AU 9050349	A1	19900813	AU 1990-50349	19900110
AU 632534	B2	19930107		

NL 9020159 A 19910102 NL 1990-20159 19900110  
 EP 453505 A1 19911030 EP 1990-902716 19900110  
 R: AT, BE, CH, DE, DK, ES, FR, GB, IT, LI, LU, NL, SE  
 JP 04502719 T2 19920521 JP 1990-502850 19900110  
 JP 07093939 B4 19951011  
 US 5300291 A 19940405 US 1991-671709 19910402  
 CA 2104474 AA 19920828 CA 1992-2104474 19920227  
 EP 728477 A2 19960828 EP 1996-106534 19920227  
 EP 728477 A3 19960911  
 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, MC, NL, SE  
 US 5686099 A 19971111 US 1993-67001 19930526  
 AU 9526998 A1 19961230 AU 1995-26998 19950607  
 AU 9528331 A1 19950928 AU 1995-28331 19950802  
 AU 694243 B2 19980716  
 WO 9640086 A2 19961219 WO 1996-US8294 19960605  
 WO 9640086 A3 19970213  
 W: AL, AM, AT, AU, AZ, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DK, EE,  
 ES, FI, GB, GE, HU, IL, IS, JP, KE, KG, KP, KR, KZ, LK, LR, LS,  
 LT, LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD,  
 SE, SG  
 RW: KE, LS, MW, SD, SZ, UG, AT, BE, CH, DE, DK, ES, FI, FR, GB, GR,  
 IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA  
 AU 9660290 A1 19961230 AU 1996-60290 19960605  
 ZA 9604735 A 19961219 ZA 1996-4735 19960606  
 PRIORITY APPLN. INFO.:  
 US 1988-164482 A2 19880304  
 US 1989-295847 A2 19890111  
 US 1991-661827 B2 19910227  
 US 1991-671709 A1 19910402  
 US 1991-813196 A2 19911223  
 US 1993-67001 A2 19930526  
 US 1993-112330 A2 19930827  
 WO 1990-US242 A 19900110  
 EP 1992-907818 A3 19920227  
 US 1995-477361 A 19950607  
 WO 1995-US7229 W 19950607  
 WO 1996-US8294 W 19960605  
 AB Comps. for topical application comprising a therapeutically effective  
 amt. of a pharmaceutical agent(s), a pharmaceutically acceptable  
 bioadhesive carrier, a solvent for the pharmaceutical agent(s) in the  
 carrier and a clay, and methods of administering the pharmaceutical agents  
 to a mammal are disclosed. A topical compn. contained lidocaine base 8.0,  
 dipropylene glycol 5.0, 60% lecithin in propylene glycol 8.0, karaya gum  
 10.0, and glycerin 6.0%.

L118 ANSWER 40 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1997:287175 HCAPLUS

DOCUMENT NUMBER: 126:347280

TITLE: Sugar base surfactant for nanocrystals

INVENTOR(S): Wong, Sui-ming

PATENT ASSIGNEE(S): Nano Systems L.L.C., USA

SOURCE: U.S., 7 pp., Cont.-in-part of U.S. Ser. No. 386,026,  
 abandoned.

CODEN: USXXAM

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 5622938	A	19970422	US 1995-444796	19950519
WO 9624335	A1	19960815	WO 1996-US1439	19960206
W: AL, AM, AT, AU, AZ, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DK, EE,				

ES, FI, GB, GE, HU, IS, JP, KE, KG, KP, KR, KZ, LK, LR, LS, LT,  
LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE,  
SG, SI

RW: KE, LS, MW, SD, SZ, UG, AT, BE, CH, DE, DK, ES, FR, GB, GR, IE,  
IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR,  
NE, SN

CA 2206430 AA 19960815 CA 1996-2206430 19960206

AU 9649127 A1 19960827 AU 1996-49127 19960206

EP 808155 A1 19971126 EP 1996-905334 19960206

R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE

JP 10513201 T2 19981215 JP 1996-524342 19960206

PRIORITY APPLN. INFO.:

US 1995-386026 19950209

US 1995-444796 19950519

WO 1996-US1439 19960206

OTHER SOURCE(S): MARPAT 126:347280

AB Dispersible particles consisting essentially of a cryst. drug substance having a sugar-based surface modifier adsorbed the surface thereof in an amt. sufficient to maintain an effective av. particle size of less than about 400 nm, methods for the prepn. of such particles and dispersions contg. the particles are disclosed. Pharmaceutical compns. contg. the particles exhibit unexpected bioavailability and are useful in methods of treating mammals. Thus, 10.57 g dodecyl isocyanate was added to a soln. of 20.67 g N1-N10-triethylenetetramine bislactobionamide in 100 mL DMF and the mixt. was heated at 50.degree. under Ar for 7 h to obtain N4,N7-didodecylisocayno-N1,N10-triethylenetetramine bislactobionamide (SA90HEG) which was sepd. and purified. A formulation contg. 15% diagnostic agent and 4% above surfactant was prepd. and autoclaved at 121.degree. for 20 min, then left to cool to room temp. SA90HEG had reduced particle size and limited the particle size growth during terminal sterilization of nanocrystal formulation. Tail vein injection of a 4% soln. of SA90HEA at 30 mL/kg was well tolerated by mice.

L118 ANSWER 41 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1997:318299 HCAPLUS

DOCUMENT NUMBER: 127:517

TITLE: Effects of adrenergic, cholinergic and ganglionic blockade on acute depressor responses to metformin in spontaneously hypertensive rats

AUTHOR(S): Muntzel, Martin S.; Abe, Ayat; Petersen, Jorgen S.

CORPORATE SOURCE: Department Biological Sciences, Lehman College, Bronx, NY, USA

SOURCE: J. Pharmacol. Exp. Ther. (1997), 281(2), 618-623

CODEN: JPETAB; ISSN: 0022-3565

PUBLISHER: Williams & Wilkins

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Changes in mean arterial pressure (MAP) and heart rate during administration of metformin alone (0, 10, 50, 100 mg/kg i.v.) and during concomitant .alpha.-adrenergic (phentolamine, 5 mg/kg), .beta.-adrenergic (propranolol, 3 mg/kg) muscarinic (atropine, 200 .mu.g/kg), ganglionic (hexamethonium, 30 mg/kg), NO synthase (NG-methyl-L-arginine acetate, 15 mg/kg) and combination ganglionic plus .alpha.-adrenergic plus .beta.-adrenergic blockade were measured in spontaneously hypertensive rats (SHR). Responses to metformin alone were also assessed in normotensive Wistar-Kyoto rats. In SHRs, metformin elicited depressor responses accompanied by tachycardia. Depressor responses in Wistar-Kyoto rats were significantly less. The hypotensive actions of metformin in SHRs were abolished and reversed to pressor responses by hexamethonium, phentolamine and by combination ganglionic plus adrenergic blockade. Neither propranolol, atropine nor NG-methyl-L-arginine acetate alone affected hypotensive responses to metformin. Acute i.v. metformin administration apparently decreases MAP by causing withdrawal of sympathetic activity. The increase in MAP in the presence of

hexamethonium and phentolamine suggests that the original depressor response to metformin is buffered by mechanisms unrelated to the autonomic nervous system.

L118 ANSWER 42 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1996:525366 HCAPLUS

DOCUMENT NUMBER: 125:211656

TITLE: Analysis of pressure/flow characteristics in the female rat and their pharmacologic modulation

AUTHOR(S): Watanabe, Takeshi; Constantinou, Christos E.

CORPORATE SOURCE: Department Urology, Tottori University, Yonago, Japan

SOURCE: Neurourol. Urodyn. (1996), 15(5), 513-527

CODEN: NEUREM; ISSN: 0733-2467

DOCUMENT TYPE: Journal

LANGUAGE: English

AB A new in vivo urodynamic animal model was developed to analyze the **micturition** characteristics of the rat. This model was used to study the modulating effect of pharmacol. agents on vesicourethral function, using cystometry and uroflowmetry. Pressure-flow studies were done in 25 female rats anesthetized with urethane. Filling cystometry was recorded using a physiol. rate of bladder filling through transvesical infusion. **Micturition** characterization was done by identifying the time course and amt. of voided vol. Voided vol. was measured by a novel application of a mechanotransducer, which provided the data to measure flow rate and compute the voided vol.-time curve. Flow rate was calcd. by differentiating the curve produced by the mechanotransducer. Using this system, comparative tests of pharmacol. stimulus were done using anticholinergic stimulation, .alpha.1 blocker, and a new N-methyl-D-aspartate (NMDA) receptor antagonist. The effects of the i.v. use of these drugs in the lower urinary tract were evaluated at various dose levels. The results showed that anticholinergic stimulation produced an increase of bladder capacity and decreases of detrusor pressure and max. flow rate. Although the .alpha.1 blocker decreased detrusor pressure, flow rate did not change significantly. By contrast, NMDA receptor antagonism produced a depressant effect on bladder reflex contraction, and increased bladder capacity in a dose-dependent way. However, max. flow rate increased at a dose of 10 mg/kg and decreased at 30 mg/kg significantly. These results suggest that a decrease in flow resistance through the outlet region was due to the effects of NMDA receptor inhibition at lower doses. In conclusion, this model enables the evaluation of drugs regarding lower urinary tract function and provides in small animals the possibility of evaluating the relationships between pressure and flow in various exptl. models.

IT 1508-65-2, Oxybutynin chloride 19216-56-9,

Prazosin

RL: BAC (Biological activity or effector, except adverse); THU

(Therapeutic use); BIOL (Biological study); USES (Uses)

(urodynamic animal model to analyze **micturition** and its pharmacol. characterization)

L118 ANSWER 43 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1996:359585 HCAPLUS

DOCUMENT NUMBER: 125:82495

TITLE: Effects of acute hypoxia on the cerebral blood flow and heart rate in carp, Cyprinus carpio

AUTHOR(S): Matsui, Haruki; Yoshikawa, Hiromasa; Nakamura, Soichi;

Kawai, Fumio; Kanamori, Masao; Kobayashi, Hiroshi

CORPORATE SOURCE: Fac. Agric., Kinki Univ., Nara, 631, Japan

SOURCE: Kinki Daigaku Nogakubu Kiyo (1996), 29, 39-51

CODEN: KDNOA2; ISSN: 0453-8889

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Cerebral blood flow with a laser Doppler flowmetry and heart rate were

examd. in carp, each weighing .apprx.500 g, immobilized with a muscle relaxant (d-tubocurarine chloride, 4 mg/kg) during 60-min hypoxia and subsequent 30-min normoxia at a water temp. of 23.degree.. Under mild hypoxia (water pO<sub>2</sub> of 100 and 75 mmHg), cerebral blood flow and heart rate remained const. relative to the normoxic values (water pO<sub>2</sub> of .apprx.150 mmHg). At levels of water pO<sub>2</sub> <25 mmHg, cerebral blood flow was significantly increased, while heart rate was significantly decreased. At water pO<sub>2</sub> of 50 mmHg some carp individually examd. showed a marked increase in cerebral blood flow without bradycardia. In addn., an i.m. injection of atropine sulfate (1.2 mg/kg) caused the increase in cerebral blood flow without bradycardia in carp subjected to hypoxia (water pO<sub>2</sub> of 25 mmHg). These findings suggest that the mechanisms involved in the cerebral circulatory regulation in response to hypoxia are different from those underlying the bradycardiac response, indicating a vagal reflex mediated through the muscarinic cholinceptor on the heart, and that cerebral circulatory regulation begins to act before the bradycardiac response in a respiratory chain. In a preliminary study, the authors found that elevation of cerebral blood flow in response to hypoxia was completely abolished by an i.m. injection of an .alpha.-adrenoceptor antagonist (phentolamine methanesulfonate, 2 mg/kg).

L118 ANSWER 44 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1996:73296 HCAPLUS  
DOCUMENT NUMBER: 124:97773  
TITLE: Percutaneously administrable preparation for treating  
urination disorder  
INVENTOR(S): Nakamura, Katsuhiko; Koga, Nobuyuki  
PATENT ASSIGNEE(S): Hisamitsu Pharmaceutical Co., Inc., Japan  
SOURCE: PCT Int. Appl., 46 pp.  
CODEN: PIXXD2  
DOCUMENT TYPE: Patent  
LANGUAGE: Japanese  
FAMILY ACC. NUM. COUNT: 1  
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9531190	A1	19951123	WO 1995-JP946	19950518
W: AU, CA, CN, JP, KR, US, VN				
RW: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
AU 9524544	A1	19951205	AU 1995-24544	19950518
EP 760238	A1	19970305	EP 1995-918735	19950518
R: CH, DE, DK, ES, FR, GB, IE, IT, LI, NL				
US 5770221	A	19980623	US 1996-737160	19961115
PRIORITY APPLN. INFO.:			JP 1994-128162	19940518
			WO 1995-JP946	19950518

AB A percutaneously administrable prepn. for treating **urination** disorder comprises a remedy for **urination** disorder and a pressure-sensitive adhesive contg. low- and high-mol.-wt. polyisobutylenes and a fat or oil as the principal base; and another such prepn. comprises a remedy for **urination** disorder and a pressure-sensitive adhesive contg. low- and high-mol.-wt. polyisobutylenes, a fat or oil and a styrene-isoprene-styrene block copolymer as the principal base. These prepn.s., contg. the above-specific base component, are excellent in stability even after the lapse of time, lowly irritative to the skin, and excellent in percutaneous absorbability. As an example, high-mol.-wt. polyisobutylene 15.5, low-mol.-wt. polyisobutylene 16.5, squalane 45.0, hydrogenated rosin esters 10.0 and pepper oil 3.0 wt. parts were dissolved in hexane, mixed with **oxybutynin**, and spread on a separable sheet, which was placed on a polyester film to give a percutaneous prepn.

IT 1508-65-2, **Oxybutynin** hydrochloride 5633-20-5,  
**Oxybutynin** 19216-56-9, **Prazosin**  
63590-64-7, **Terazosin**

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)  
 (Percutaneously administrable prepn. for treating **urination**  
 disorder)

L118 ANSWER 45 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1994:491779 HCAPLUS  
 DOCUMENT NUMBER: 121:91779  
 TITLE: Pyrroloquinoline bradykinin antagonists  
 INVENTOR(S): Witherup, Keith M.; Ransom, Richard W.; Varga, Sandor  
 L.; Pitzenberger, Steven M.; Lotti, Victor J.; Lumma,  
 William J.  
 PATENT ASSIGNEE(S): Merck and Co., Inc., USA  
 SOURCE: U.S., 16 pp.  
 CODEN: USXXAM  
 DOCUMENT TYPE: Patent  
 LANGUAGE: English  
 FAMILY ACC. NUM. COUNT: 1  
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 5288725	A	19940222	US 1992-961589	19921015
WO 9409001	A1	19940428	WO 1993-US9681	19931006
W: AU, BB, BG, BR, BY, CA, CZ, FI, HU, JP, KR, KZ, LK, LV, MG, MN, MW, NO, NZ, PL, RO, RU, SD, SK, UA				
RW: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG				
AU 9453272	A1	19940509	AU 1994-53272	19931006
PRIORITY APPLN. INFO.:			US 1992-961589	19921015
			WO 1993-US9681	19931006

OTHER SOURCE(S): MARPAT 121:91779

AB A pyrroloquinoline compd., e.g. I, exhibits bradykinin antagonist activity as well as activity with .alpha.-adrenergic, histaminergic, and muscarinic receptors. I was isolated from an ext. of *Martinella iquitosensis* using a solvent methylene chloride-MeOH (1:1) and tested for its activity.

L118 ANSWER 46 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1993:420336 HCAPLUS  
 DOCUMENT NUMBER: 119:20336  
 TITLE: Effects of drugs used in the therapy of detrusor hyperactivity on the volume-induced contractions of the rat urinary bladder  
 AUTHOR(S): Guarneri, L.; Ibba, M.; Angelico, P.; Colombo, D.; Fredella, B.; Testa, R.  
 CORPORATE SOURCE: Pharmacol. Dep., Recordati S.p.A., Milan, 20148, Italy  
 SOURCE: Pharmacol. Res. (1993), 27(2), 173-87  
 CODEN: PHMREP; ISSN: 1043-6618  
 DOCUMENT TYPE: Journal  
 LANGUAGE: English

AB In this study, the authors examd. the effects of the drugs most commonly utilized in the therapy of overactive detrusor, on the vol.-induced contractions of rat urinary bladder. Anticholinergics such as propantheline bromide and emepronium bromide, as well as **oxybutynin** decreased the amplitude of the voiding contractions after i.v. administration in a dose-dependent way. These anticholinergics, on the other hand, generally increased the frequency of the contractions. Nifedipine dose-dependently reduced the amplitude of the contractions. Flavoxate induced a dose-related decrease in the frequency without effects on the amplitude of the peaks. Its main metabolite 3-methylflavone-8-carboxylic acid (MFCA) was inactive after i.v. administration. Terodiline was active on the amplitude and apparently on the frequency of the voiding contractions. The .alpha.-adrenoceptor antagonist **prazosin**, as well as

indomethacin, inhibited only the frequency of the voiding contractions. All the drugs active in reducing the frequency of the voiding contractions after i.v. administration, proved effective also after intracerebroventricular (i.c.v.) injection. The model of the vol.-induced contractions of rat urinary bladder, seems to be a useful tool to evaluate in vivo the effects of a compd. on the bladder, allowing the possibility of distinguishing among antimuscarinics and calcium antagonists, which peripherally decrease bladder contractility, and other drugs inducing a decrease in the frequency of the voiding reflex acting on the micturition centers in the CNS.

IT 5633-20-5, Oxybutynin 19216-56-9,

Prazosin

RL: BIOL (Biological study)

(urinary bladder contraction response to, detrusor hyperactivity treatment in relation to)

L118 ANSWER 47 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1992:483266 HCAPLUS

DOCUMENT NUMBER: 117:83266

TITLE: Inhibitory effects of imipramine on intracellular calcium(2+) mobilization in cultured rat frontal cortical neurons

AUTHOR(S): Shimizu, Masami; Nishida, Akira; Yamawaki, Shigeto

CORPORATE SOURCE: Inst. Clin. Res., Kure Natl. Hosp., Kure, 737, Japan

SOURCE: Yakubutsu, Seishin, Kodo (1991), 11(5), 311-17

CODEN: YSKODB; ISSN: 0285-5313

DOCUMENT TYPE: Journal

LANGUAGE: Japanese

AB The authors examd. the effects of imipramine on cytosolic Ca<sup>2+</sup> concn. ([Ca<sup>2+</sup>]<sub>i</sub>) in cultured rat frontocortical neurons exposed to various treatments (high K<sup>+</sup>, acetylcholine; ACh or noradrenaline; NA) using the Ca<sup>2+</sup>-sensitive dye fura-2. Imipramine inhibited high K<sup>+</sup>-induced [Ca<sup>2+</sup>]<sub>i</sub> increases with IC<sub>50</sub> value of 71 .mu.M, after washing the cells free of the drug, these effects were abolished. ACh and NA increased [Ca<sup>2+</sup>]<sub>i</sub> in a dose-dependent manner. Imipramine also inhibited ACh- and NA-induced [Ca<sup>2+</sup>]<sub>i</sub> increases with IC<sub>50</sub> values of 3.7 and 4.1 .mu.M, resp. These results indicated that imipramine inhibited the high K<sup>+</sup>-induced [Ca<sup>2+</sup>]<sub>i</sub> increase by the blockade of voltage-dependent Ca<sup>2+</sup> channels, and the ACh- and NA-induced [Ca<sup>2+</sup>]<sub>i</sub> increases by the blockade of muscarinic receptors and .alpha.1-adrenoceptors, resp. Moreover, imipramine abolished the [Ca<sup>2+</sup>]<sub>i</sub> oscillations, periodic fluctuations in [Ca<sup>2+</sup>]<sub>i</sub> were obsd. in a few cells only. Because [Ca<sup>2+</sup>]<sub>i</sub> oscillations were mediated by not only voltage-dependent Ca<sup>2+</sup> channels, but also various receptors, it was likely that the inhibition of [Ca<sup>2+</sup>]<sub>i</sub> oscillations by imipramine was due to the blockade of voltage-dependent Ca<sup>2+</sup> channels, muscarinic receptors or .alpha.1-adrenoceptors.

L118 ANSWER 48 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1992:604662 HCAPLUS

DOCUMENT NUMBER: 117:204662

TITLE: Tamoxifen: A universal ion channel and receptor ligand?

AUTHOR(S): Gopalakrishnan, Murali; Triggle, David J.

CORPORATE SOURCE: Sch. Pharm., State Univ. New York, Buffalo, NY, 14260, USA

SOURCE: Pharm. Pharmacol. Lett. (1991), 1(2), 82-7

CODEN: PPLEE3

DOCUMENT TYPE: Journal

LANGUAGE: English

AB The inhibitory actions of tamoxifen on L- and N-type Ca<sup>2+</sup> channels, Ca<sup>2+</sup>-activated K<sup>+</sup> channels, and muscarinic, .alpha.- and .beta.-adrenergic receptors were studied by detg. the effect on binding of specific ligands to rat cerebral cortex preps. Tamoxifen was active in all these tests,



the highest activity being obsd. on the L-channel.

L118 ANSWER 49 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1989:88375 HCAPLUS

DOCUMENT NUMBER: 110:88375

TITLE: Polyamines: a possible "passe-partout" for receptor characterization

AUTHOR(S): Melchiorre, C.; Angeli, P.; Brasili, L.; Giardina, D.; Gulinì, U.; Pigini, M.; Quaglia, W.

CORPORATE SOURCE: Dip. Sci. Chim., Univ. Camerino, Camerino, 62032, Italy

SOURCE: Actual. Chim. Ther. (1988), 15, 149-68

CODEN: ACHTD9; ISSN: 0338-8999

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Simple linear mols. affect different neurotransmitter receptor systems not only potently but also selectively. In particular, polymethylene tetraamines are selective antagonists of .alpha.1 and .alpha.2-adrenoreceptors and cardiac M-2 muscarinic receptors which clearly indicates that several receptor systems may have features in common as regards ionic interactions. Polymethylene tetraamines display receptor specificity since they are site-directed owing to different chain lengths between the nitrogens and to the presence of particular structural elements, such as disulfide bonds or benzyl-type substituents, which make them capable of discriminating at the binding stage. In conclusion, polymethylene polyamine may represent not only a "master-key" for receptor characterization but may also provide leads for developing new drugs. The use of benextramine and bendotramine homologs as .alpha.-adrenergic receptor antagonists and methoctramine analogs as M-2 muscarinic receptor antagonists is described.

L118 ANSWER 50 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1985:516201 HCAPLUS

DOCUMENT NUMBER: 103:116201

TITLE: Cirazoline, an .alpha.2-adrenoceptor antagonist in guinea pig ileum

AUTHOR(S): Mottram, D. R.; Saggat, P.

CORPORATE SOURCE: Sch. Pharm., Liverpool Polytech., Liverpool, L3 3AF, UK

SOURCE: Gen. Pharmacol. (1985), 16(4), 367-70

CODEN: GEPHDP; ISSN: 0306-3623

DOCUMENT TYPE: Journal

LANGUAGE: English

AB In studies in guinea pig ileum, at high concns. cirazoline [59939-16-1] had an antimuscarinic activity with a pA2 value of 5.25. At concns. below those producing blockade of acetylcholine [51-84-3], cirazoline blocked the prejunctional .alpha.2-adrenoceptor activity of clonidine [4205-90-7], pA2 6.81, and .alpha.-methylnoradrenaline [6539-57-7]. The results are discussed in the light of controversial evidence for the activity of cirazoline on .alpha.-adrenoceptors.

L118 ANSWER 51 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1982:574990 HCAPLUS

DOCUMENT NUMBER: 97:174990

TITLE: Direct measurement of the anticholinergic activity of a series of pharmacological compounds on the canine and rabbit urinary bladder

AUTHOR(S): Levin, Robert M.; Wein, Alan J.

CORPORATE SOURCE: Sch. Med., Univ. Pennsylvania, Philadelphia, PA, USA

SOURCE: J. Urol. (Baltimore) (1982), 128(2), 396-8

CODEN: JOURAA; ISSN: 0022-5347

DOCUMENT TYPE: Journal

LANGUAGE: English

AB The relative potency of a variety of drugs to compete for muscarinic cholinergic receptors isolated from the canine and rabbit urinary bladder was detd. Radio-ligand binding assays for muscarinic receptors were performed with 10 nM 3H-labeled quinuclidinyl benzilate and various concns. of the drugs under study. Of the agents tested propantheline (I) [298-50-0], atropine [51-55-8], and glycopyrrolate [596-51-0] were the potent muscarinic antagonists/unit of concn. **oxybutynin** [5633-20-5] And dicyclomine [77-19-0] were 30 to 50 times less potent than atropine. chlorpromazine [50-53-3] And desmethyylimipramine [50-47-5] were approx. 500 times less potent than atropine. Agents such as guanethidine [55-65-2], tranylcypromine [155-09-9], and hexamethonium [60-26-4] possessed little antimuscarinic activity.

IT 5633-20-5 19216-56-9

RL: BIOL (Biological study)

(antimuscarinic activity of, bladder response in relation to)

L118 ANSWER 52 OF 73 HCAPLUS COPYRIGHT 2001 ACS

ACCESSION NUMBER: 1983:65328 HCAPLUS

DOCUMENT NUMBER: 98:65328

TITLE: Pharmacological specificity of conditioned avoidance response inhibition in rats: inhibition by neuroleptics and correlation to dopamine receptor blockade

AUTHOR(S): Arnt, Joern

CORPORATE SOURCE: Dep. Pharmacol. Toxicol., H. Lundbeck og Co. A/S, Valby, 2500, Den.

SOURCE: Acta Pharmacol. Toxicol. (1982), 51(4), 321-9  
CODEN: APTOA6; ISSN: 0001-6683

DOCUMENT TYPE: Journal

LANGUAGE: English

AB The inhibitory effect of 36 neuroleptic compds. on conditioned avoidance response (CAR) and unconditioned escape response (UER) has been studied in rats. All neuroleptics antagonized CAR in doses below those inhibiting UER and below those inducing catalepsy. Stereospecificity was shown in 2 cases. Significant correlation was found between CAR inhibitory and cataleptogenic potency. Also inhibition of amphetamine-induced stereotypy, affinity to 3H-haloperidol binding in vitro, and clin. potency was significantly correlated to CAR inhibition. CAR and UER inhibition induced by cis(Z)-flupentixol (I) [53772-82-0] and haloperidol [52-86-8] was attenuated by scopolamine, but was only weakly influenced by methysergide and prazosin. Among a wide range of other CNS active compds. tested, CAR was inhibited by .alpha.1-adrenergic antagonists, benzodiazepines, a barbiturate, GABA agonists, morphine, and a serotonin agonist, but in doses inducing other motor disturbances. Thus, CAR inhibition is a sensitive test for dopamine receptor antagonists. However, addnl. .alpha.-adrenergic activity found for some neuroleptics (e.g. clozapine [5786-21-0], chlorprothixene [113-59-7]) may contribute to the CAR inhibitory potency. Addnl. antimuscarinic activity of neuroleptics may moderately attenuate CAR inhibition whereas serotonin receptor blockade is of minor importance.

L118 ANSWER 53 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 2000209079 EMBASE

TITLE: Drug therapy for urinary incontinence.

AUTHOR: Andersson K.-E.

CORPORATE SOURCE: Prof. K.-E. Andersson, Department of Clinical Pharmacology, Lund University Hospital, S-22815 Lund, Sweden

SOURCE: Bailliere's Best Practice and Research in Clinical Obstetrics and Gynaecology, (2000) 14/2 (291-313).  
Refs: 148

ISSN: 1521-6934 CODEN: BPRGFM

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 010 Obstetrics and Gynecology  
028 Urology and Nephrology  
037 Drug Literature Index  
038 Adverse Reactions Titles

LANGUAGE: English

SUMMARY LANGUAGE: English

AB Drugs used for treatment of urinary incontinence may act on the central nervous system (CNS) or peripherally. Few drugs with a defined CNS site of action are available for treatment of urine storage disorders; most of those currently used have a peripheral site of action. To treat bladder overactivity associated with urgency and urge incontinence, antimuscarinic drugs, .alpha.-adrenoceptor antagonists, .beta.-adrenoceptor agonists, prostaglandin synthesis inhibitors, and several other agents most often developed for non-urological indications, are employed. Current treatment is based on the use of antimuscarinic drugs, and oxybutynin is, despite a high incidence of side-effects, the gold standard. Pharmacological treatment of stress incontinence has had limited success, and only .alpha.-adrenoceptor agonists, with and without combination with oestrogens have had a documented effect. New drugs, specifically directed at treatment of urine storage disorders, are desirable.

L118 ANSWER 54 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 2000292886 EMBASE

TITLE: Urinary incontinence.

AUTHOR: Edwards C.

SOURCE: Pharmacy in Practice, (2000) 10/6 (224-229).

ISSN: 1358-1538 CODEN: PHPRF7

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 006 Internal Medicine  
020 Gerontology and Geriatrics  
028 Urology and Nephrology  
037 Drug Literature Index  
038 Adverse Reactions Titles

LANGUAGE: English

L118 ANSWER 55 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 2000362280 EMBASE

TITLE: Summary of the meeting.

AUTHOR: Blaivas J.G.

SOURCE: BJU International, Supplement, (2000) 86/2 (55).

ISSN: 1465-5101 CODEN: BJISF5

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; Conference Article

FILE SEGMENT: 028 Urology and Nephrology  
037 Drug Literature Index  
038 Adverse Reactions Titles

LANGUAGE: English

L118 ANSWER 56 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 2000362279 EMBASE

TITLE: Modern pharmacotherapy of urge urinary incontinence in the USA: Tolterodine and oxybutynin.

AUTHOR: Rovner E.S.; Wein A.J.; Blaivas; Andersson; Michel; Schwinn

CORPORATE SOURCE: Dr. E.S. Rovner, Division of Urology, 3400 Spruce St., Philadelphia, PA 19104, United States

SOURCE: BJU International, Supplement, (2000) 86/2 (44-54).

Refs: 64

ISSN: 1465-5101 CODEN: BJISF5

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; Conference Article

FILE SEGMENT: 028 Urology and Nephrology  
030 Pharmacology

037 Drug Literature Index  
038 Adverse Reactions Titles  
LANGUAGE: English  
L118 ANSWER 57 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.  
ACCESSION NUMBER: 2000362273 EMBASE  
TITLE: BJU International: Introduction.  
AUTHOR: Blaivas J.G.  
SOURCE: BJU International, Supplement, (2000) 86/2 (v).  
ISSN: 1465-5101 CODEN: BJISF5  
COUNTRY: United Kingdom  
DOCUMENT TYPE: Journal; Editorial  
FILE SEGMENT: 028 Urology and Nephrology  
037 Drug Literature Index  
038 Adverse Reactions Titles  
LANGUAGE: English

L118 ANSWER 58 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.  
ACCESSION NUMBER: 1999208638 EMBASE  
TITLE: Effects of a .beta.2-agonist on airway hyperreactivity in subjects with cervical spinal cord injury.  
AUTHOR: DeLuca R.V.; Grimm D.R.; Lesser M.; Bauman W.A.; Almenoff P.L.  
CORPORATE SOURCE: Dr. M. Lesser, Spinal Cord Damage Research, 130 West Kingsbridge Road, Bronx, NY 10468, United States  
SOURCE: Chest, (1999) 115/6 (1533-1538).  
Refs: 41  
ISSN: 0012-3692 CODEN: CHETBF  
COUNTRY: United States  
DOCUMENT TYPE: Journal; Article  
FILE SEGMENT: 008 Neurology and Neurosurgery  
015 Chest Diseases, Thoracic Surgery and Tuberculosis  
033 Orthopedic Surgery  
037 Drug Literature Index  
LANGUAGE: English  
SUMMARY LANGUAGE: English

AB Study Objective: Aerosolized ipratropium bromide or orally administered baclofen or oxybutynin chloride (Ditropan) block methacholine-associated airway hyperreactivity in subjects with chronic cervical spinal cord injury (SCI), whereas these agents do not inhibit airway hyperreactivity associated with the inhalation of histamine. The present study was performed to determine whether pretreatment with a .beta.2-agonist attenuates airway hyperresponsiveness in these subjects. Participants: Subjects with chronic cervical SCI previously demonstrating airway hyperreactivity were challenged with methacholine (n = 9) or histamine (n = 16) alone and, on a separate day, 25 min following inhalation of nebulized metaproterenol sulfate. Results: Inhalation of the .beta.2-agonist was associated with an increase in provocative concentration causing a 20% decrease in FEV1 (PC20) values (geometric mean) from 1.01 +/- 2.76 to 20.54 +/- 6.24 mg/mL for methacholine and from 2.29 +/- 2.26 to 19.82 +/- 5.93 mg/mL for histamine. No correlation was found between specific PC20 values for individual subjects and percentage improvement in FEV1 (liter) following inhalation of metaproterenol sulfate and between PC20 values and baseline FEV1 percent. Conclusion: These data, combined with findings that patients with chronic high cervical SCI experience increased breathlessness following exposure to exogenous agents, suggest that long-term prophylactic .beta.2-agonist therapy may reduce respiratory symptoms associated with airway hyperreactivity in these patients.

L118 ANSWER 59 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.  
ACCESSION NUMBER: 1999041260 EMBASE  
TITLE: Advances in the pharmacological control of the bladder.

AUTHOR: Andersson K.-E.  
CORPORATE SOURCE: K.-E. Andersson, Department of Clinical Pharmacology, Lund University Hospital, S-22221 Lund, Sweden  
SOURCE: Experimental Physiology, (1999) 84/1 (195-213).  
Refs: 138  
ISSN: 0958-0670 CODEN: EXPHEZ  
COUNTRY: United Kingdom  
DOCUMENT TYPE: Journal; Conference Article  
FILE SEGMENT: 028 Urology and Nephrology  
030 Pharmacology  
037 Drug Literature Index  
038 Adverse Reactions Titles  
LANGUAGE: English

L118 ANSWER 60 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.  
ACCESSION NUMBER: 2000040144 EMBASE  
TITLE: [Updating treatment for benign prostatic hyperplasia in the elderly].  
ACTUALIZACION DEL TRATAMIENTO FARMACOLOGICO EN LA INCONTINENCIA URINARIA DEL ANCIANO.  
AUTHOR: Salinas Casado J.; Virseda Chamorro M.; Teba del Pino F.; Vazquez Alba D.  
CORPORATE SOURCE: J. Salinas Casado, Servicio de Urologia, Hospital Universitario San Carlos, Doctor Martin Lagos, s/n, 28040 Madrid, Spain  
SOURCE: Revista Espanola de Geriatria y Gerontologia, (1999) 34/SUPPL. 3 (43-50).  
Refs: 79  
ISSN: 0211-139X CODEN: REGGDU  
COUNTRY: Spain  
DOCUMENT TYPE: Journal; General Review  
FILE SEGMENT: 009 Surgery  
020 Gerontology and Geriatrics  
028 Urology and Nephrology  
037 Drug Literature Index  
038 Adverse Reactions Titles  
LANGUAGE: Spanish

L118 ANSWER 61 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.  
ACCESSION NUMBER: 96373790 EMBASE  
DOCUMENT NUMBER: 1996373790  
TITLE: Clozapine-induced urinary incontinence: Incidence and treatment with ephedrine.  
AUTHOR: Fuller M.A.; Borovicka M.C.; Jaskiw G.E.; Simon M.R.; Kwon K.; Konicki P.E.  
CORPORATE SOURCE: Pharmacy Service 119(B), 10000 Brecksville Road, Brecksville, OH 44141, United States  
SOURCE: Journal of Clinical Psychiatry, (1996) 57/11 (514-518).  
ISSN: 0160-6689 CODEN: JCLPDE  
COUNTRY: United States  
DOCUMENT TYPE: Journal; Article  
FILE SEGMENT: 028 Urology and Nephrology  
032 Psychiatry  
037 Drug Literature Index  
038 Adverse Reactions Titles  
LANGUAGE: English  
SUMMARY LANGUAGE: English

AB Background: Treatment with the atypical antipsychotic drug clozapine appears to be associated with an increased incidence of urinary incontinence (UI). We posited that the potent anti-.alpha.-adrenergic effects of clozapine were involved, and hence that an .alpha.-adrenergic agonist would reduce UI. We tested this hypothesis by using ephedrine, an approved .alpha.-adrenergic agonist. Method: Fifty-seven inpatients with

schizophrenia or schizoaffective disorder (DSM-IV) who met the Kane criteria for being treatment refractory were treated with clozapine (75-900 mg/day). Patients who developed UI were then openly treated with ephedrine in increasing doses until UI was attenuated or a dose of 150 mg/day was attained. Results: Seventeen patients developed UI as evidenced by either urine-stained sheets/clothing or direct patient reports. In 2 cases, the UI was sufficiently severe that adult diapers had to be used. Comparison of patients who developed UI and those who did not showed that UI was associated with female gender and with concomitant treatment with typical antipsychotic drugs. One patient was treated with a behavioral program, but the remaining 16 patients were treated with ephedrine. Ephedrine treatment was very effective, with 15/16 patients showing improvement within 24 hours after reaching maximum ephedrine dosage. Twelve of 16 (including the 2 most severe) eventually had a complete remission of their UI. In the remaining 4 patients, 3 had a reduction in the frequency of UI and 1 showed no response. These benefits have been maintained over the course of 12 months of subsequent treatment for several patients. There were no side effects associated with the use of ephedrine nor were there any changes in neuropsychiatric status. Conclusion: Ephedrine appears to be a safe and effective treatment for clozapine-associated UI. By inference, it is likely that clozapine may cause UI via its anti-.alpha.-adrenergic properties.

L118 ANSWER 62 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 96115505 EMBASE

DOCUMENT NUMBER: 1996115505

TITLE: Urinary bladder function and drug development.

AUTHOR: Ferguson D.; Christopher N.

CORPORATE SOURCE: Department of Pharmacology, University of  
Cambridge, Cambridge CB2 1QQ, United Kingdom

SOURCE: Trends in Pharmacological Sciences, (1996) 17/4 (161-165).

ISSN: 0165-6147 CODEN: TPHSDY

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; General Review

FILE SEGMENT: 002 Physiology  
005 General Pathology and Pathological Anatomy  
020 Gerontology and Geriatrics  
028 Urology and Nephrology  
030 Pharmacology  
037 Drug Literature Index  
038 Adverse Reactions Titles

LANGUAGE: English

SUMMARY LANGUAGE: English

AB Disorders of the bladder are extremely common and are becoming more so in an ageing population. Recently, our understanding of lower urinary tract physiology and pathology has also increased. Here, Douglas Ferguson and Nim Christopher summarize this new knowledge of lower urinary tract function, the changes in innervation that occur with age and the common disease states, and discuss how it is being used to develop new drug treatments for bladder disorders.

L118 ANSWER 63 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 96081858 EMBASE

DOCUMENT NUMBER: 1996081858

TITLE: Effect of receptor blockers on brain natriuretic peptide and C-type natriuretic peptide caused anxiolytic state in rats.

AUTHOR: Biro E.; Toth G.; Telegdy G.

CORPORATE SOURCE: Department Pathophysiology, Albert Szent-Gyorgyi Medical Univ., P.O. Box 531, 6701 Szeged, Hungary

SOURCE: Neuropeptides, (1996) 30/1 (59-65).

ISSN: 0143-4179 CODEN: NRPPDD

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; Article  
FILE SEGMENT: 003 Endocrinology  
032 Psychiatry  
030 Pharmacology  
037 Drug Literature Index

LANGUAGE: English  
SUMMARY LANGUAGE: English

AB Effect of different doses of centrally administered brain natriuretic peptide (BNP) and C-type natriuretic peptide (CNP) were examined in rats with respect to anxiolytic properties in an elevated plus-maze model. BNP in doses of 100, 200 and 400 ng, and CNP in doses of 100 and 200 ng abolished the normal preference for the closed arms of the maze, and increased the percentage time spent in the open arms; this is consistent with an 'anxiolytic-like' effect. Doses of 50 and 1000 ng BNP, and of 25, 50, 400 and 1000 ng CNP produced no behavioural effects in the elevated plus-maze model. Pretreatment with an  $\alpha$ -adrenoreceptor antagonist or a muscarinergic cholinergic blocker, antagonized the effect of 200 ng BNP in the elevated plus-maze test. The 'anxiolytic-like' effects of a BNP were not modulated by a dopaminergic blocker, an  $\alpha$ -adrenoreceptor antagonist, a GABA receptor antagonist, a 5-HT receptor antagonist or an opiate antagonist. The 'anxiolytic-like' effect of CNP was prevented by a dopamine receptor antagonist, or an  $\alpha$ - or  $\beta$ -adrenoreceptor blocker but not by a muscarinergic cholinergic blocker, a GABA receptor, a 5-HT receptor antagonist or an opiate receptor antagonist. These results suggest that multiple neurotransmitter system activation might be responsible for the BNP and CNP-induced 'anxiolytic-like' activity.

L118 ANSWER 64 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 95188724 EMBASE

DOCUMENT NUMBER: 1995188724

TITLE: Recent progress in the pharmacotherapy of diseases of the lower urinary tract.

AUTHOR: Hieble J.P.; McCafferty G.P.; Naselsky D.P.; Bergsma D.J.; Ruffolo Jr. R.R.

CORPORATE SOURCE: Pharmacological Sciences, SmithKline Beecham Pharmaceuticals, P.O.Box 1539, King of Prussia, PA 19406, United States

SOURCE: European Journal of Medicinal Chemistry, (1995) 30/SUPPL. (269s-298s).

ISSN: 0223-5234 CODEN: EJMCA5

COUNTRY: France

DOCUMENT TYPE: Journal; Conference Article

FILE SEGMENT: 008 Neurology and Neurosurgery  
028 Urology and Nephrology  
030 Pharmacology  
037 Drug Literature Index  
038 Adverse Reactions Titles

LANGUAGE: English

L118 ANSWER 65 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 95349926 EMBASE

DOCUMENT NUMBER: 1995349926

TITLE: The drug treatment of patients with schizophrenia.

SOURCE: Drug and Therapeutics Bulletin, (1995) 33/11 (81-86).

ISSN: 0012-6543 CODEN: DRTBAE

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal; (Short Survey)

FILE SEGMENT: 030 Pharmacology  
032 Psychiatry  
037 Drug Literature Index  
038 Adverse Reactions Titles

LANGUAGE: English

SUMMARY LANGUAGE: English

AB Patients with schizophrenia are managed more and more in the community, with care that demands close collaboration between community mental health teams and general practitioners. Treatment with antipsychotic drugs is one essential part of management, which should also include social and psychological support for the patient and carers. The drugs are given both to control acute psychotic symptoms and, in the long term, to prevent relapse. Once started, treatment may be continued lifelong, so it is essential that the diagnosis is established beyond reasonable doubt. In this article we review the drug treatment of schizophrenia.

L118 ANSWER 66 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.  
ACCESSION NUMBER: 92348791 EMBASE  
DOCUMENT NUMBER: 1992348791  
TITLE: [Urological pathology in the elderly].  
PATOLOGIA UROLOGICA EN EL ANCIANO.  
AUTHOR: Cots Yago J.M.  
CORPORATE SOURCE: ABS Dr. Carles Ribas, Barcelona, Spain  
SOURCE: Atencion Primaria, (1992) 10/6 (837-838+840-842).  
ISSN: 0212-6567 CODEN: ATEPEY  
COUNTRY: Spain  
DOCUMENT TYPE: Journal; General Review  
FILE SEGMENT: 005 General Pathology and Pathological Anatomy  
020 Gerontology and Geriatrics  
028 Urology and Nephrology  
037 Drug Literature Index  
LANGUAGE: Spanish

L118 ANSWER 67 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.  
ACCESSION NUMBER: 92346906 EMBASE  
DOCUMENT NUMBER: 1992346906  
TITLE: Clinical pharmacology in neurourology.  
AUTHOR: Appell R.A.  
CORPORATE SOURCE: Department of Urology, Louisiana State Univ. Medical  
Center, 1542 Tulane Avenue, New Orleans, LA 70112-2822,  
United States  
SOURCE: Problems in Urology, (1992) 6/4 I (622-642).  
ISSN: 0889-471X CODEN: PRUREX  
COUNTRY: United States  
DOCUMENT TYPE: Journal; General Review  
FILE SEGMENT: 028 Urology and Nephrology  
030 Pharmacology  
037 Drug Literature Index  
LANGUAGE: English  
SUMMARY LANGUAGE: English

AB Pharmacotherapy may be used to treat individuals with various voiding dysfunctions, especially those of a neurogenic etiology. Based upon the neurophysiology of the lower urinary tract, it would be expected that certain pharmacologic agents facilitate bladder emptying while others facilitate bladder storage. The clinical application of currently available pharmacologic agents in the management of neurogenic vesicourethral dysfunction is reviewed with regard to efficacy and safety of specific medications.

L118 ANSWER 68 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.  
ACCESSION NUMBER: 92030436 EMBASE  
DOCUMENT NUMBER: 1992030436  
TITLE: Benign and malignant prostatic diseases.  
AUTHOR: Crawford E.D.  
CORPORATE SOURCE: University of Colorado Health Sciences Center, Denver, CO,  
United States  
SOURCE: American Family Physician, (1991) 44/5 SUPPL. (65S-70S).  
ISSN: 0002-838X CODEN: AFPYAE  
COUNTRY: United States



DOCUMENT TYPE: Journal; General Review  
FILE SEGMENT: 016 Cancer  
020 Gerontology and Geriatrics  
028 Urology and Nephrology  
030 Pharmacology  
037 Drug Literature Index

LANGUAGE: English

SUMMARY LANGUAGE: English

AB The risk of prostatic diseases and disorders increases with age. Symptomatic benign prostatic hyperplasia is often treated with transurethral resection of the prostate. Antibiotic therapy is generally effective in bacterial prostatitis, but both chronic bacterial prostatitis with recurrent urinary tract infection and nonbacterial prostatitis remain difficult to treat. Early diagnosis of prostate cancer improves survival. Therapeutic options include surgery, radiotherapy and hormone therapy.

L118 ANSWER 69 OF 73 EMBASE COPYRIGHT 2001 ELSEVIER SCI. B.V.

ACCESSION NUMBER: 88234769 EMBASE

DOCUMENT NUMBER: 1988234769

TITLE: A review of flavoxate hydrochloride in the treatment of urge incontinence.

AUTHOR: Ruffmann R.

CORPORATE SOURCE: Medical Department, Recordati SpA, 20148 Milan, Italy

SOURCE: Journal of International Medical Research, (1988) 16/5 (317-330).

ISSN: 0300-0605 CODEN: JIMRBV

COUNTRY: United Kingdom

DOCUMENT TYPE: Journal

FILE SEGMENT: 028 Urology and Nephrology  
052 Toxicology  
030 Pharmacology  
037 Drug Literature Index  
038 Adverse Reactions Titles

LANGUAGE: English

SUMMARY LANGUAGE: English

AB This article provides a review of the use of flavoxate hydrochloride in the treatment of urge incontinence. It outlines the pharmacology, mode of action, toxicology and pharmacokinetic studies which have been carried out, and then reviews the clinical studies, including those involving patients with benign prostatic hypertrophy. The effects of dosages of 600-1200 mg/day are compared, particularly regarding safety and tolerability factors. Finally, alternative therapies to flavoxate hydrochloride (.alpha.-adrenergic receptor blockers, oxybutinin chloride, terodiline hydrochloride, emepronium bromide and imipramine) are summarized. The article is written in the knowledge of recent evidence which indicates that flavoxate hydrochloride exhibits only weak anticholinergic activity on receptors involved in the control of the lower urinary tract.

L118 ANSWER 70 OF 73 WPIDS COPYRIGHT 2001 DERWENT INFORMATION LTD

ACCESSION NUMBER: 2000-656203 [63] WPIDS

DOC. NO. CPI: C2000-198607

TITLE: Use of CYP2D6 inhibitors for improving pharmacokinetic profile of drugs, cleared by CYP2D6 mediated oxidative biotransformation.

DERWENT CLASS: B03 B05

INVENTOR(S): OBACH, R S

PATENT ASSIGNEE(S): (PFIZ) PFIZER PROD INC

COUNTRY COUNT: 90

PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
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WO 2000059486 A2 20001012 (200063)\* EN 17  
 RW: AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW NL  
 OA PT SD SE SL SZ TZ UG ZW  
 W: AE AL AM AT AU AZ BA BB BG BR BY CA CH CN CR CU CZ DE DK DM EE ES  
 FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS  
 LT LU LV MA MD MG MK MN MW MX NO NZ PL PT RO RU SD SE SG SI SK SL  
 TJ TM TR TT TZ UA UG US UZ VN YU ZA ZW  
 AU 2000031850 A 20001023 (200107)

## APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 2000059486	A2	WO 2000-IB304	20000320
AU 2000031850	A	AU 2000-31850	20000320

## FILING DETAILS:

PATENT NO	KIND	PATENT NO
AU 2000031850	A Based on	WO 200059486

PRIORITY APPLN. INFO: US 1999-128136P 19990407

AB WO 200059486 A UPAB: 20001205

NOVELTY - A novel method for administering a drug or its salts for which the major clearance mechanism in humans is CYP2D6 mediated oxidative biotransformation comprises administering the drug in combination with a CYP2D6 inhibitor or their salts to a human in need of the intended pharmaceutical activity of such drug, where the drug and the CYP2D6 inhibitor are not the same compound.

DETAILED DESCRIPTION - An INDEPENDENT CLAIM is are also included for a pharmaceutical composition comprising:

(a) a drug for which the major clearance mechanism in humans is CYP2D6 mediated oxidative biotransformation, or a salt;

(b) an amount of a CYP2D6 inhibitor, or a salt, that is effective in treating the disorder or condition for which the drug as in (a) is intended to treat; and

(c) a carrier; where the drug and the CYP2D6 inhibitor are not the same compound.

USE - The methods can be used to improve the pharmacokinetics of therapeutically useful, but pharmacokinetically flawed compounds. The following protocol can be used to determine the impact that co-administration of a CYP2D6 inhibitor with a therapeutic drug, as defined above, would have on the pharmacokinetics of the therapeutic drug.

ADVANTAGE - The use of the CYP2D6 inhibitor compounds improves the half-life of CYP2D6 cleared compounds. Furthermore, the CYP2D6 inhibitor enhances oral exposure due to a suppression of hepatic first-pass extraction.

Dwg.0/0

L118 ANSWER 71 OF 73 WPIDS COPYRIGHT 2001 DERWENT INFORMATION LTD  
 ACCESSION NUMBER: 1999-229126 [19] WPIDS  
 DOC. NO. CPI: C1999-067371  
 TITLE: Flexible dosage forms to administer drug, e.g. nifedipine, at sustained-release rate.  
 DERWENT CLASS: B07  
 INVENTOR(S): EDGREN, D E; SKLUZACEK, R R  
 PATENT ASSIGNEE(S): (ALZA) ALZA CORP  
 COUNTRY COUNT: 82  
 PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
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WO 9912527 A2 19990318 (199919)\* EN 48  
 RW: AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW NL  
 OA PT SD SE SZ UG ZW  
 W: AL AM AT AU AZ BA BB BG BR BY CA CH CN CU CZ DE DK EE ES FI GB GE  
 GH GM HR HU ID IL IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MD MG  
 MK MN MW MX NO NZ PL PT RO RU SD SE SG SI SK SL TJ TM TR TT UA UG  
 US UZ VN YU ZW  
 AU 9892230 A 19990329 (199932)

## APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
WO 9912527	A2	WO 1998-US18555	19980904
AU 9892230	A	AU 1998-92230	19980904

## FILING DETAILS:

PATENT NO	KIND	PATENT NO
AU 9892230	A Based on	WO 9912527

PRIORITY APPLN. INFO: US 1997-58323P 19970909

AB WO 9912527 A UPAB: 20011203

NOVELTY - Dosage forms comprising orally administrable therapeutic composition containing drug dose and polymer carrier to deliver drug at sustained-release rate over extended time.

DETAILED DESCRIPTION - Dosage forms comprise:

(a) orally administrable therapeutic composition comprising drug dose and polymer carrier to transport drug from dosage form;

(b) membrane surrounding therapeutic composition comprising polymer permeable to passage of fluid, plasticizer, surfactant and binder; and

(c) exit in membrane to deliver drug at sustained-release rate over extended time.

USE - The dosage forms are used to administer drug at sustained-release rate over extended time (claimed). The drugs include central-nervous system actives, depressants, hypnotics, sedatives, tranquilizers, muscle relaxants, analgesics, anesthetics, hormones, contraceptives, sympathomimetics, diuretics, antiparasitics, hypoglycemics, ophthalmics and cardiovascular drugs e.g. vancomycin, valoxifene, cyclosporin, lisinopril, ondansetron, fluvoxamine, captopril, phentolamine, enalapril, amisulpride, imipramine, carbamazepine, famciclovir, clomipramine, penciclovir, pergolide, mesalazine, enitabas, talviraline, clozapine, nevirapine, zidovudine, ganciclovir alendronic, imiquimod, naratriptan, sparfloxacin, lamivudine, zidovudine, omeprazole, aciclovir, valaciclovir, oxcarbazepine, ganciclovir, amfebutamone, cidofovir, **doxazosin**, ebastine, formoterol, moexipril, penciclovir, sertraline, spirapril, fenfluramine, dexfenfluramine, phentermine, fenphen, **oxybutynin**, felodipene, metoprolol, saquinavir, ritonavir, indinavir and neflinavir.

ADVANTAGE - The dosage form is capable of changing its shape (claimed). It delivers required dose of drug for without the risk of overdose. It maintains its physical integrity while delivering therapeutic dose of drug while avoiding and/or reducing the risks associated with dose dumping. It also changes from rested state to flexible state and can deliver dose of drug over controlled rate over a sustained release period. It attains zero-order drug-delivery profile. The membrane is flexible, enabling dosage form to change shape and deliver essentially its total drug content. The membrane is able to under change from a fixed, rigid, non-rounded shape to a flexible rounded shape to enhance delivery of drug. The dosage form requires intervention only for initiation and possible termination of regimen.

DESCRIPTION OF DRAWING(S) - Dosage form for oral administration of

therapeutic agent to gastrointestinal tract of a human.  
 dosage form 10  
 body member 11  
 membrane 12  
 exit 13  
 Dwg.1/8

L118 ANSWER 72 OF 73 WPIDS COPYRIGHT 2001 DERWENT INFORMATION LTD  
 ACCESSION NUMBER: 1995-107104 [15] WPIDS  
 DOC. NO. CPI: C1995-048819  
 TITLE: Pharmaceutical pellet with steady gastric and enteric  
 release - contains drug core and hybrid coating  
 part-soluble at pH both of stomach and of intestine, used  
 partic. for opiate(s) in pain relief.  
 DERWENT CLASS: A96 B07  
 INVENTOR(S): FISHER, M C; MORELLA, A M  
 PATENT ASSIGNEE(S): (FAUL-N) FAULDING & CO LTD F H; (FAUL-N) FAULDING & CO  
 LTD F H  
 COUNTRY COUNT: 3  
 PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
AU 9341654	A	19950216	(199515)*		58
NZ 248166	A	19950427	(199522)		
AU 668174	B	19960426	(199624)		
CN 1107331	A	19950830	(199732)		

## APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
AU 9341654	A	Add to	AU 1990-47732 19900105
			AU 1993-41654 19930630
NZ 248166	A		NZ 1993-248166 19930716
AU 668174	B	Add to	AU 1990-47732 19900105
			AU 1993-41654 19930630
CN 1107331	A		CN 1994-115992 19940630

## FILING DETAILS:

PATENT NO	KIND	PATENT NO
AU 668174	B Previous Publ.	AU 9341654

PRIORITY APPLN. INFO: AU 1993-41654 19930630; AU 1990-47732 19900105

AB AU 9341654 A UPAB: 19970619

Sustained release pharmaceutical pellet compsn. includes (a) a core element including active ingredient(s) with aq. solubility greater than 1 in 30, and (b) a coating, partially soluble at a highly acidic pH for the core, in which the active ingredient is available for absorption at a relatively constant rate in the intestine over an extended period of time.

USE - The compsn. is used to provide blood levels of highly soluble active ingredients with minimal fluctuation with time, whether the solubility is pH dependent or independent. A wide variety of bioactives, including antihistamines, antibiotics, antitubercular, cholinergics, **antimuscarinics**, sympathomimetics, **sympatholytics**, autonomic drugs, iron prepns., haemostatics, cardiac drugs, antihypertensives, vasodilators, NSAIDs, opiate agonists, anticonvulsants, tranquillisers, stimulants, hypnotics and sedatives, expectorants, antiemetics, gastrointestinal drugs, heavy metal antagonists, antithyroidal, genito-urinary drugs, smooth muscle relaxants and

vitamins are listed in the disclosure. Most of the subject matter and the claims relate to opiate agonists, codeine, dextromoramide, hydrocodone, hydromorphone, morphine, pethidine, methadone and propoxyphene, used in relief of moderate or severe pain, partic. severe pain due to surgical operations or in cancer and partic. use of morphine. The compsn. can either be dosed as such, or compressed into a tablet.

ADVANTAGE - The compsn. avoids the dangers of 'dumping', sudden release of active agent due to its high solubility, causing variable blood levels, with possible toxic effects or failure to relieve the pain. The compsn. can be taken orally, most conveniently, provides steady relief of pain for several hrs., and bioavailability not compromised by food, all leading to good patient compliance. The compsn. can be tailored to be superior to known prior art prepsn. with some sustained release activity. These tailored prod. can opt. be mixed to provide a plurality of pellets with different release times in the dose form, giving an extended release period.

Dwg.0/9

L118 ANSWER 73 OF 73 WPIDS COPYRIGHT 2001 DERWENT INFORMATION LTD  
 ACCESSION NUMBER: 1990-356085 [48] WPIDS  
 DOC. NO. CPI: C1990-154654  
 TITLE: Transplantation of fertilised ova - aided by admin. of para **sympatholytic** agent esp. prifinium bromide or scopolamine butyl bromide to recipient animal e.g. cattle.  
 DERWENT CLASS: B02 B03 C02 P14  
 INVENTOR(S): KATSUMI, A  
 PATENT ASSIGNEE(S): (FUJI) FUJISAWA PHARM CO LTD; (YAMA-N) YAMAGATA KEN KUMIAI  
 COUNTRY COUNT: 18  
 PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
EP 399423	A	19901128	(199048)*		
R: AT BE CH DE ES FR GB GR IT LI LU NL SE					
AU 9055887	A	19901129	(199104)		
CA 2017155	A	19901125	(199108)		
JP 03272631	A	19911204	(199204)		
US 5135933	A	19920804	(199234)		3
AU 638713	B	19930708	(199334)		
JP 06083622	B2	19941026	(199441)		3
CA 2017155	C	19960820	(199644)		
EP 399423	B1	19970319	(199716)	EN	5
R: AT BE CH DE DK ES FR GB IT LI LU NL SE					
DE 69030214	E	19970424	(199722)		
ES 2099076	T3	19970516	(199727)		

#### APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
EP 399423	A	EP 1990-109571	19900519
JP 03272631	A	JP 1990-131058	19900521
US 5135933	A	US 1990-525050	19900518
AU 638713	B	AU 1990-55887	19900524
JP 06083622	B2	JP 1990-131058	19900521
CA 2017155	C	CA 1990-2017155	19900518
EP 399423	B1	EP 1990-109571	19900519
DE 69030214	E	DE 1990-630214	19900519
		EP 1990-109571	19900519
ES 2099076	T3	EP 1990-109571	19900519

## FILING DETAILS:

PATENT NO	KIND	PATENT NO
AU 638713	B Previous Publ.	AU 9055887
JP 06083622	B2 Based on	JP 03272631
DE 69030214	E Based on	EP 399423
ES 2099076	T3 Based on	EP 399423

PRIORITY APPLN. INFO: JP 1989-133927 19890525; JP 1989-343985  
19891229

AB EP 399423 A UPAB: 19941115

(a) A method for transplanting fertilised ova characterised by administering a **parasympatholytic** agent to a recipient animal and then transplanting fertilised ova in the animal; and (b) a veterinary compsn. as an adjunct to transplantation of fertilised ova which contains a **parasympatholytic** agent. The **parasympatholytic** agent is esp. prifinium bromide (I) or scopolamine butyl bromide (II).

USE/ADVANTAGE - (I) and (II) are known to relieve tone and spasm, increased motor function, and pain in the alimentary and **urinary** tracts. Admin. of a **parasympatholytic** agent such as (I) or (II) to recipient cattle relaxes the rectal and uterine walls weu+ without relaxing the sphincter ani, thus the instrument used for transplanting ova can be inserted deeper into the uterus to help achieve an improved conception rate. This method is pref. to the conventional non-surgical transplantation method carried out under local anaesthetic (using e.g. lidocaine), which relaxes the sphincter ani allowing air to enter and expand the rectum interfering with the procedure and reducing the conception rate. Typical intravenous dose of (I) is 30-50mg, and of (II) is 80-140mg to recipient cattle. (I) may be used at ovum collection at a dose of 50-100mg. @ (4pp Dwg.No.0/0)  
0/0

FILE 'HOME' ENTERED AT 15:35:48 ON 18 DEC 2001